

Form CPF M 102: Campaign Finance Report

Municipal Form

RECEIVED TOWN CLERK BELMONT, MA

Office of Campaign and Political Finance

of Massachusetts	File with: City of Town Clerk of Election Commission
Fill in Reporting Period dates: Beginning Date: 6/07/	/2020 Ending Date: 7/19/2020 7/16/2020
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	⊠ 30 day after election
Adam Dash Candidate Full Name (if applicable) Member of the Select Board Office Sought and District	Elect Adam Dash Committee Name David Zipkin Name of Committee Treasurer
12 Goden St, Belmont, MA 02478 Residential Address E-mail: dash@adamdashlaw.com Phone # (optional):	137 Claflin St, Belmont, MA 0247 Committee Mailing Address E-mail: david.zipkin@gmail.com Phone # (optional):
Priorie # (optional).	Prione # (optional).
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	\$5461.08
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$5461.08
Line 4: Total expenditures this period (page 5, line	
Line 5: Ending Balance (line 3 minus line 4)	\$5,348.97
Line 6: Total in-kind contributions this period (pag	
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used: People's United Bank	K
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disburgements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in a signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	
Candidate with Committee	best of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: 7/16/7025

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

port all receipts. Please include your committee name and a page number on each page.) Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)		
Date Received	None				
	None				
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		L			
entre de la composition della					
ı					
	-				
ine 9: Total Rece	ipts over \$50 (or listed above)	\$0.00			
7. 10tul Rocc					
Line 10: Total Receipts \$50 and under* (not listed above)		\$0.00			
(0.000000000000000000000000000000000000			+		
ine 11: TOTAL	RECEIPTS IN THE PERIOD	\$0.00	← Enter on page 1, line 2		
	d receipts of \$50 and under include them in lin	<u> </u>			

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	None		

Taranta de la casa de			
	и .	31	
Line 9: Total Rece	ipts over \$50 (or listed above)	\$0.00	
	eipts \$50 and under* (not listed above)	\$0.00	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	\$0.00	Enter on page 1. line 2
		0 0 Line 10 show	Enter on page 1, line 2 Id include only those receipts not itemized above.

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
6/25/2020	Belmont Printing	46 Brighton St Belmont, MA 02478	Collateral Printing	\$106.11
6/10/2020	People's United Bank	2 Leondard St Belmont, MA	Bank Fee	\$3.00
7/10/2020	People's United Bank	2 Leondard St Belmont, MA	Bank Fee	\$3.00
·				
		Line 12: Total Expenditure	es over \$50 (or listed above)	\$112.11
		Line 13: Total Expenditure	s \$50 and under* (not listed above)	\$0.00
	Enter on page 1, line 4	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	\$112.11

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
	See previous				
		processing and an analysis of the state of t			
	Transmission of the second of	**************************************			
	:				
120000000000000000000000000000000000000					
			Manual Control of the		
	Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					
If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized					

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received		Residential Address	Description of Contribution	Value
	None			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	\$0.00
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$ Line 17: TOTAL IN-KIND CONTRIBUTIONS $\$0.00$			

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	None			
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		*···		
				·
	Enter on page 1, line 7 →			\$0.00