

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: 11/2	28/23 Ending Date: 12/31/23			
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	☐ 30 day after election			
Candidate Full Name (if applicable)  Select Board  Office Sought and District  59 Edgemoor Road, Belmont, MA 02478  Residential Address  E-mail: mattforbelmont@gmail.com  Phone #: 917 524 8295	Committee to Elect Matt Taylor  Committee Name  Matthew Lennon  Name of Committee Treasurer  59 Edgemoor Road, Belmont, MA 02478  Committee Mailing Address  E-mail: mattforbelmont@gmail.com  Phone #: 917 524 8295			
Line 1: Ending Balance from previous report  Line 2: Total receipts this period (page 3, line 12)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 5, line 15)  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 6)  Line 7: Total (all) outstanding liabilities (page 7, line  Line 8: Total out-of-pocket expenses this period (page  Line 9: Name of bank(s) used:  M&T Bank	0.00 4407.27 4407.27 1553.73 2853.54 5, line 18)			
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.  Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.  Date: 12/31/23				
Signed under the penalties of perjury:	(Candidate's signature)			

#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
12/17/23	Michael Crowley 119 Farnham Street, Belmont, MA 02478	51.99	
12/14/23	Kenneth Estvanik 14 Winter Way, Enfield, CT 06082	100.00	
12/23/23	FayeRuth Fisher 39 Raleigh Road, Belmont, MA 02478	154.97	
12/5/23	Helen Golding 18 Louise Road, Belmont, MA 02478	100.00	
12/9/23	Jessica Hausman 11 Sharpe Road, Belmont, MA 02478	200.00	Unemployed
12/30/23	Mary Jackmin 53 Raleigh Road, Belmont, MA 02478	206.46	Physician Assistant Boston Children's Hospital
12/5/23	Matthew Lennon 26 Pequossette Road, Belmont, MA 02478	100.00	
12/8/23	Mary Lewis 34 Randolph Street, Belmont, MA 02478	100.00	
12/5/23	Adriana Poole 53 Louise Road, Belmont, MA 02478	515.38	Real Estate Agent Berkshire Hathaway HomeServices
12/7/23	Alex Rigopulos 2 Emerson Street, Belmont, MA 02478	1000.00	Video Game Designer Epic Games
12/9/23	Paul Roberts 54 Cross Street, Belmont, MA 02478	90.00	
12/6/23	Heather Rubeski 133 Dalton Road, Belmont, MA 02478	51.99	

# **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/8/23	Matt Taylor 59 Edgemoor Road, Belmont, MA 02478	1000.00	Data Analyst Self Employed
12/17/23	Artun Uzatmaciyan 50 Olcott Street #2, Watertown, MA 02472	515.38	Stock Trader Self Employed
12/20/23	Jung Yueh 151 Waverley Street, Belmont, MA 02478	200.00	Actuary Protobi, Inc.
	eipts over \$50 (or listed above)	4386.17	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not
	RECEIPTS IN THE PERIOD	21.10	itemized above.

### **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	To Whom Paid		- 07 11	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
12/18/23	Connolly Printing	17B Gill Street, Woburn, MA 01801	Yard Signs	1432.25

# **SCHEDULE B: EXPENDITURES (continued)**

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
should include only those expenditures not		Line 13: Expenditures over \$50 (or listed above)		1432.25
		Line 14: Expenditures \$50 and under (not listed above)		121.48
	itemized above.			
Enter on page 1, line $4 \rightarrow$ Line 15: TOTAL EXPENDITURES IN THE PERIOD 1553.73			1553./3	

### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a-page number on each additional pages.

Date Received	From Whom Received*		Description of Contribution	Value
* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.		Line 16: In-Kind Contributions over \$50 (or listed above)		0
		Line 17: In-Kind Contributions \$50 and under (not listed above)		0
	Enter on page 1, line 6 →	Line 18: TOTAL IN-KIND CONT	RIBUTIONS IN THE PERIOD	0

### **SCHEDULE D: LIABILITIES**

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

Date Incurred	To Whom Due	Address	Purpose	Amount
<u>_</u>	Enter on page 1, line 7 → Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)			

### SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
(or listed above)	ed Out-Of-Pocket Expenditures Over \$50 mized Out-Of-Pocket Expenditures \$50 and (ve)	0	* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		0	← Enter on page 1, line 8  Page 8