



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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2019 JAN -8 AM 8:24

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/2018 Ending Date: 12/31/2018

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☒ dissolution

N/A Ballot Question

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

E-mail:

Phone # (optional):

Yes for Belmont

Committee Name

David Zipkin

Name of Committee Treasurer

137 Claflin St, Belmont, MA 02478

Committee Mailing Address

E-mail:

david.zipkin@gmail.com

Phone # (optional):

(206) 930-8511

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$26,396.00

Line 2: Total receipts this period (page 3, line 11)

\$320.00

Line 3: Subtotal (line 1 plus line 2)

\$26,716.00

Line 4: Total expenditures this period (page 5, line 14)

\$26,716.00

Line 5: Ending Balance (line 3 minus line 4)

\$0.00

Line 6: Total in-kind contributions this period (page 6)

\$58.00

Line 7: Total (all) outstanding liabilities (page 7)

\$0.00

Line 8: Name of bank(s) used: Belmont Savings Bank

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:

Shirley Chair / *David Zipkin*

(Treasurer's signature)

Date: 1/1/19

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the 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.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date: _____

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	See Schedule A Attachment		
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		Attachment	← Enter on page 1, line 2

* 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)
	See Schedule A Attachment		
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		Attachment	

* 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 report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	See Schedule B Attachment			
		Line 12: Total Expenditures over \$50 (or listed above)		
		Line 13: Total Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 →		Line 14: TOTAL EXPENDITURES IN THE PERIOD		Attachment

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	See Schedule B Attachment			
		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	Attachment	

* 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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	-blank line-			
12/23/2018	Jessica Bennett	15 Trowbridge St. Belmont, MA 02478	Reimbursement for advertising (facebook.com)	\$29.00
12/23/2018	David Zipkin	137 Claflin St Belmont, MA 02478	Reimbursement for advertising (facebook.com)	\$29.00
Line 15: In-Kind Contributions over \$50 (or listed above)				\$58.00
Line 16: In-Kind Contributions \$50 & under (not listed above)				
<div style="display: flex; justify-content: space-between; align-items: center;"> Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS </div>				\$58.00

* 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.

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			
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				\$0.00

Date	Name	Address	Amount	Occupation / Employer
10/26/2018	Griffin, Susan	9 Anis Rd, Belmont, MA 02478	\$50.00	
10/22/2018	Kazmi, Hena	45 Winter St, Belmont, MA 02478	\$50.00	
10/30/2018	Mahony, Mary	228 Common St, Belmont, MA 02478	\$100.00	
10/23/2018	Norton, Jill	96 Park St, Belmont, MA 02478	\$100.00	
11/3/2018	Ormond, Makrina	85 Monroe St, Belmont, MA 02478	\$20.00	
		Line 9: Total Receipts over \$50 (or listed above)	\$320.00	
		Line 10: Total Receipts \$50 and under* (not listed above)	\$0.00	
		Line 11: Total Receipts In The Period	\$320.00	

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
10/25/2018	Belmont Printing	46 Brighton St, Belmont, MA 02478	Printing	\$1,300.57
10/25/2018	Belmont Printing	46 Brighton St, Belmont, MA 02478	Printing	\$3,081.30
10/22/2018	Belmont Public Schools	644 Pleasant Street, Belmont, MA 02478	Space rental	\$202.50
11/4/2018	Bennett, Jessica	15 Trowbridge St, Belmont, MA 02478	Reimbursement for ads (Facebook)	\$395.17
11/9/2018	Bennett, Jessica	15 Trowbridge St, Belmont, MA 02478	Reimbursement for ads (Facebook)	\$500.00
10/22/2018	Connolly Printing	17 Gill St, Woburn, MA 01801	Printing	\$903.13
10/21/2018	Connolly Printing	17 Gill St, Woburn, MA 01801	Printing	\$4,953.20
10/24/2018	Connolly Printing	17 Gill St, Woburn, MA 01801	Printing	\$1,445.00
12/14/2018	Fountain for Belmont Education	121 Concord Ave, Belmont, MA 02478	Final donation	\$6,817.91
10/22/2018	Gatehouse Media	9 Meriam St, Lexington, MA 02420	Advertising	\$2,117.54
11/21/2018	Hamer, Lyn	81 Kilburn Rd, Belmont, MA 02478	Design Services	\$4,000.00
11/13/2018	Lewis, Mary	34 Randolph St, Belmont, MA 02478	Reimbursement for web service (SignUp Genius)	\$49.98
11/9/2018	Nuscher, Dave	50 Winn St, Belmont, MA 02478	Reimbursement for email software (Mailbird)	\$18.00
12/31/2018	Paypal	2211 North First Street, San Jose, CA 95131	Credit card processing	\$6.70
11/13/2018	Rickter, Paul	119 Cross Street, Belmont, MA 02478	Reimbursement for phone numbers (Melissa Global Intel)	\$150.00
11/14/2018	Schreiber, Ellen	49 Sandrick Rd, Belmont, MA 02478	Reimbursement for web service (Textly)	\$25.00
11/20/2018	The Belmontonian	12 Unity Ave, Belmont, MA 02478	Advertising	\$150.00
10/20/2018	Trien, Vanessa	12 Kent Square, #2, Brookline, MA 02446	Event performance	\$600.00
		Line 12: Total Expenditures over \$50 (or listed above)		\$26,716.00
		Line 13: Total Expenditures \$50 and under* (not listed above)		\$0.00
		Line 14: Total Expenditures In the Period		\$26,716.00