



Commonwealth
of Massachusetts

Form CPF D 102 : Campaign Finance Report Office of Campaign and Political Finance

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File with: Director

Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108
(617) 727-8352

CPF ID# _____

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month Feb Date 23 Year 2017 Ending Month March Date 27 Year 2017

Type of report: (Check one)

☒ Initial Report ☐ Year-end Report ☐ Dissolution Report ☐ Other

Guy A. Carbone
Full Name of Candidate

Selectman
Office Sought/District

65 Woodfall Rd, Belmont
Residential Address

Tel. No. (optional)

Carbone for Selectman Committee
Committee Name

Fred M. Kelley
Name of Committee Treasurer

50 Beatrice Circle, Belmont
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
Line 2: Total receipts this period (page 2, line 11) \$ 6,635
Line 3: Subtotal (line 1 plus line 2) \$ 6,635
Line 4: Total expenditures this period (page 3, line 14) \$ 4,451.11
Line 5: Ending balance (line 3 minus line 4) \$ 2,183.89
Line 6: Total in-kind contributions this period (page 3) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 6,555.92
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:

Fred M. Kelley
Treasurer's signature (in ink)

3/27/2017
Date

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, and 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:

Guy A. Carbone
Candidate signature (in ink)

3/27/17
Date

SCHEDULE A: RECEIPTS

INITIAL REPORT: Report any receipts received before appointing the depository bank

OTHER REPORTS: You may omit schedule A information, as this has previously been disclosed on the reports filed by your depository bank. However, you must summarize your receipts on lines 9 - 11.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	<i>See attached</i>		
Line 9: Total receipts in excess of \$50		<i>\$12,500</i>	-
Line 10: Total receipts \$50 and under		<i>\$335</i>	-
Line 11: TOTAL RECEIPTS IN THE PERIOD		<i>\$12,835</i>	-

Enter on page 1, line 2.

SAVINGS ACCOUNT INFORMATION

Are there any campaign funds on deposit in savings accounts/CDs etc.? ☒ No (go to page 3) ☐ Yes

If yes, complete the following:

Name(s) of Bank(s) and/or CDs	Amount in account/CD etc.
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
SAVINGS ACCOUNT/CD TOTAL:	
	\$ <i> </i>

All funds held in savings accounts, CDs etc. should be included in line 5, (ending balance) on page 1.

SCHEDULE B: EXPENDITURES

INITIAL REPORT: Report any expenditures made before appointing the depository bank.

OTHER REPORTS: You may omit schedule B information, as this has previously been disclosed on the reports filed by your depository bank. However, you must summarize your expenditures on lines 12 - 14.

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.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
	<i>See attached</i>				
			Line 12: Expenditures over \$50	\$4,418	\$9
			Line 13: Expenditures \$50 and under	32	22
			Line 14: TOTAL EXPENDITURES	4,451	"

Enter on page 1, line 4

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

In-kind contributions are not reported by a depository bank. You must report all in-kind contributions for the reporting period on this form (or attached sheets). 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-kind over \$50	0
			Line 16: In-kind \$50 and under	0
			Line 17: Total In-kind	0

Enter on page 1, line 6

* 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 contributor has given an aggregate amount of \$200 or more in a calendar year, the contributor's occupation and employer must also be reported.

This page may be copied if additional pages are required to report all expenditures or all in-kind contributions. Please include your committee name, CPF ID# and a page number on each page.

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
3/6 - 3/23	Connolly Printing	17 Gill St Noburn	printed materials	\$5,749.73
3/15	Fast Signs		banners	770.31
4/23	WordPress		web domain	35.88
Enter on page 1, line 7.				Line 18: OUTSTANDING LIABILITIES (ALL) \$6,555.92

SCHEDULE E: DISCLOSURE OF ASSETS STATEMENT

All candidates and committees must fill in part A or part B.

Part A:

☒ No assets* were acquired or disposed of by this candidate/committee during the period covered by this statement.

Part B:

Assets acquired. List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset <small>Include year, model or other identifying information, if applicable.</small>	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset <small>Include year, model or other identifying information, if applicable.</small>	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value <small>Attach statement of how value is determined.</small>

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

* An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

This page may be copied if additional pages are required to report all liabilities or assets. Please include your committee name, CPF ID# and a page number on each page.



Schedule A: Receipts

Date	Name	Address	Amount	Occupation & Employer
3/17/2017	Allison V Lenk	145 Sherman St Belmont, MA 02478	\$100	
3/13/2017	Camille S Baghdady	18 Dante Ave Belmont, MA 02478	\$100	
3/13/2017	Cynthia J Taylor	315 Channing Rd Belmont, MA 02478	\$100	
3/13/2017	David C Benoit Enterprises	405 Concord Ave Belmont, MA 02478	\$200	detective David C. Benoit Enterprises
3/13/2017	Frank E French	44 Evergreen Way Belmont, MA 02478	\$100	
3/25/2017	Glenn Herosian	585 Pleasant Street Belmont, MA 02478	\$200	
3/13/2017	James M Mahoney	17 Barnard St Belmont, MA 02478	\$100	
3/11/2017	Janice M Ellard	12 Horace Rd Belmont, MA 02478	\$200	retired
3/20/2017	Kenneth O. Freiner	17 Cutter St Belmont, MA 02478	\$150	
3/13/2017	Michael B Brodigan	40 Broad St Boston, MA 02109	\$250	attorney Brodigan & Gardiner
3/13/2017	Michael B French	67 Fairmont St Belmont, MA 02478	\$100	
3/26/2017	Nicola De Magistris	84 Leonard St Belmont, MA 02478	\$250	owner Leon & Co.
3/12/2017	Peter H Noone	3 Brighton St Belmont, MA 02478	\$100	
3/13/2017	Robert M Locke	44 Livermore Rd Belmont, MA 02478	\$100	
3/7/2017	Thomas E Norton	35 Larchmont Ln Belmont, MA 02478	\$200	attorney Thomas E. Norton Jr. Law Office
Total receipts in excess of \$50			\$6,300	
Total receipts under \$50			\$335	
TOTAL RECEIPTS IN THE PERIOD			\$6,635	

SCHEDULE B: EXPENDITURES

Date Paid	To Whom Paid	Address	Purpose	Amount
3/27/2017	American Express	Trapelo Road Belmont, MA	reimbursement for stamps	\$588.00
3/25/2017	Il Casale	50 Leonard St Belmont, MA	Meet Guy event	\$3,152.00
3/12/2017	Staples	Soldiers Field Rd Boston, MA	printing	\$346.89
3/14/2017	USPS	Trapelo Road Belmont, MA	stamps	\$68.60
Expenditures over \$50				\$4,418.89
Expenditures \$50 and under				\$32.22
TOTAL EXPENDITURES				\$4,451.11

