

Form CPF M 102: Campaign Finance Report Municipal Form TOWN CLERK BELMONT, MA

Office of Campaign and Political Finance

Commonwealth of Massachusett		/		2015 File with	MAR 30 PH : City or Town Clerk	3: 43	on Commission
Fill in Rep	orting Period dates: Beginning Date: Jan 3:	1, 2015		Ending Date:	Mar 30, 2015		
Type of Re	eport: (Check one)	☐ 30 d	ay afte	er election :	year-end report	dis	solution
		Jim V	Millian	ns for Selectman		250	MOZ
james Richa	ard Williams Candidate Full Name (if applicable)			Com	mittee Name	1	520
Soloctman	in Belmont, MA	Clau	s Beck			70-	ZOS
Selection	Office Sought and District				ommittee Treasurer	- F	- SAU
7 Glenn Rd		PO E	lox 58	2, Belmont, MA 02		5	DX
L	Residential Address				ee Mailing Address		
Telephone Nu	mber (optional):	Telep	ione Ni	umber (optional):			
	SUMMARY BALANC	CE INI	ORI	MATION:			
	Line 1: Ending Balance from previous report					0	
	Line 2: Total receipts this period (page 3, line 11)			6,0	055	
	Line 3: Subtotal (line 1 plus line 2)				6,	055	
	Line 4: Total expenditures this period (page 5, li	ine 14)	Ĺ		695	5.73	
	Line 5: Ending Balance (line 3 minus line 4)				5,359).27	
	Line 6: Total in-kind contributions this period ()	page 6)				0	
	Line 7: Total (all) outstanding liabilities (page 7	/)			5	00	
	Line 8: Name of bank(s) used: Belmont Savings	Bank					
Affidavit of I certify that activity, incl	Committee Treasurer: Thave examined this report including attached schedules and it is, to the building all contributions, loans, receipts, expenditures, disbursement, indicate the property of all persons acting under the authority of on beloff of this committee.	pest of my my contrib	knowled Itions a ance wi	th the requirements of M	1.G.L. c. 55.	of all cam resents the	
	er the penaltics of perjury:			(Treasurer's sign	nature) Date	: [Mai 3	0, 2013
Candle	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check I date with Committee and no activity independent of the committee by that I have examined this report including attached schedules and it is, to y, of all persons acting under the authority or on behalf of this committee in the second	the best on accordan	f my kn	nowledge and belief, a tr the requirements of M.	ue and complete state G.L. c. 55. I have not	ment of a	II campaign financ any contributions,
Candi Cartif finance	y, of all persons acting that the authority of officents acting this reported any liabilities nor made any expenditures on my behalf during this report date without Committee OR Candidate with independent activity filing that I have examined this report including attached schedules and it is, to expenditures, an object of activity, including contributions, loans, recorpts, expenditures, an object of activity of allowersons acting under the authority or of the hill of the penalties of perjury:	g separate	e repor	t nowledge and belief, a tr	ue and complete state for this reporting peri- quitements of M.J.	ement of a	ll campaign

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.)

eport all receipts. P	ease include your committee name and a pag		Occupation & Employer
Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)
3-28-15	ALCOVA, Anthony 172 Waverly Street	75	Retired
2-2-15	Barry Dan & Balbara 129 Goden Street	250	Attorney Boston SEC
1-31-15	Becker, Claus 20 Poplar St	200	Merrimack Pharma conticals
3-13-15	11	400	II
3-15-15	Bak, Laura Frandolp 86 van Ness Rd	400	AEXILETED Loyed
2-10-15	Bithner, Martin 207 Claflin	100	PhD Coordinates Operations
3-19-15	Davis, Mark W	100	Scientist Intel Corporation
2-5-15	Donaldson, Stephen 16 Dana Rd	25	Unknown
2-26-15	Elmer, William 1010 Temple Grv, Winter Dark, FL 32783	200	Retired
	Vav W. 4 L 32 183		
7/1 3-29-	Huang, Caroline 39 Howells Rol	105	Home maker
3-10-1	King, Darell 30 Long Ave	25	TIAX LLC
Line 9: Total Re	ceipts over \$50 (or listed above)		
Line 10: Total R	eceipts \$50 and under* (not listed above)		
Line 11: TOTA	L RECEIPTS IN THE PERIOD		Enter on page 1, line 2
* If you have itemi	zed receipts of \$50 and under, include them in	line 9. Line 10 sho	ould include only those receipts not itemized above. Page

SCHEDULE A: RECEIPTS (continued)

	D II dal Address		Occupation & Employer
Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)
3-11-15	15Kan derian Vera 330 Waverlay St	100	Self-employed
3-11-15	Mahon, Matthew 19 Alma Ave	100	Real Estate Agent Century 21
3-16-15	Mitchell, Melissa Gi 5 Stults Ave	25	Retired
3-26-15	Ogilby, McFarlan 88 Toylor Rd	200	REQUESTED UNKNOWN
3-6-15	Randolph, N.	100	UNKNOWN
2-6-15	Rigopulos, Alex 2 Emerson St	1,000	AROUNGS Chairman Harmonix
2-13-15	Robbins, Mark 1337 Mass. Ave, Arl.	200	DECUESTIFICE RESOURCE Institute
2-9-15	C La Caclas	1,000	ACOUNTY Architect SA2 Studios
3-27-15	Califical David	250	Meters Comployed
3-22-19	Singler Judy 53 Selwin Rd	50	Retired
3-23-15	(10,000)	50	Freetown Associates
3-27-15	Thayer, Phil 39 Oak Are	(00	Analyst
2-9-15	Williams, Jim 7 Glenn Rd	500	→ ((を・・・・-))
Line 9: Total Re	eceipts over \$50 (or listed above)	6,055.0	90
	eccipts \$50 and under* (not listed above)	0	
T. 11. TOTA	1 DECEIPTS IN THE PERIOD	6,055	Enter on page 1, line 2
* If you have item	ized receipts of \$50 and under, include them in	line 9. Line 10 sh	nould 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,

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to from committee records, and reported on line 13.

ditures. Please include vour committee name and a page number on each page.)

(A "Schedule B: Expenditures" attachment is available to complete, production on each page.) eport all expenditures. Please include your committee name and a page number on each page.)						
report an expend	To Whom Paid		Purpose of Expenditure	Amount		
Date Paid	(alphabetical listing)	Address	901/5/1/6	1111100		
3/00	a ma caralla	376 ARSENAL ST NATERTOWN, MA	(((() () () () () () ()	214.38		
3/26	ALPHA CHAPPACS	WATESCIOWN, MA				
		1601 CALIFORNOR	APVERTITIVO	50.03		
3/27	CACCALONA	1 20 20 20 20 0	///			
103	FACEBOOK	PALO ALTO, CA	100000	16.58		
21	PAYPAL	221/ FIRST ST.	AOVERTIZINO	10.50		
3/30	1 A Y FAC	SANJOSE, CA				
		464 COMMON ST BELMONT, MA	RONATING	414.38		
3/26	UPS STORE	1960 00000000000000000000000000000000000	W W W W W	914.00		
1726		BELMONT, MY				
				11 11		
	· III					
	W					
			III			
			· ·			
				695.73		
		Line 12: Total Expenditure	s over \$50 (or listed above)	670.13		
			\$50 and under* (not listed above	e) O		
	and the second second			695.73		
57 - SEED - SEED	Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD Line 14: TOTAL EXPENDITURES IN THE PERIOD Line 14: TOTAL EXPENDITURES IN THE PERIOD For the page 1, line 4 -> 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 Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	LE B: EXPENDITURES (C		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over	\$50 (or listed above)	
			and under* (not listed above)	
	P			
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD * 16 year 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	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contribution		0
			ns \$50 & under (not listed above	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	0

^{*} 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
3/30	C.CHAPUT	LEOMINSTER, MA	ADVICE	500
	Filter on page f. filte:	r → Line 18: TOTAL OUTSTA	DING LIABILITIES (ALL)	