

Form CPF M 102: Campaign Finance Report Municipal Form TOWN CLERK Office of Campaign and Political Finance BELMONT, MA.

Commonwealth of Massachusetts	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: May	2, 2012 Ending Date: Dec 31, 2012			
Type of Report: (Check one)				
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution			
Daniel Scharfman	Committee to Elect Dan Scharfman			
Candidate Full Name (if applicable)	Committee Name			
Office of Selectman, Belmont	Anne Lougee			
Office Sought and District	Name of Committee Treasurer			
79 School Street, Belmont, MA 02478	34 Warwick Road, Belmont, MA 02478			
Residential Address	Committee Mailing Address			
Telephone Number (optional):	Telephone Number (optional):			
SUMMARY BALANC	E INFORMATION:			
Line 1: Ending Balance from previous report	621.32			
Line 2: Total receipts this period (page 3, line 11)	0			
Line 3: Subtotal (line 1 plus line 2)	621.32			
Line 4: Total expenditures this period (page 5, lin	e 14) 0			
Line 5: Ending Balance (line 3 minus line 4)	0			
Line 6: Total in-kind contributions this period (pa	ge 6) 0			
Line 7: Total (all) outstanding liabilities (page 7)	0			
Line 8: Name of bank(s) used: East Cambridge Sav	rings 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: (Treasurer's signature) Date: Jan 12, 2013				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check bo	x 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: Jan 13, 2013			

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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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	1		
ine 9: Total Recei	pts over \$50 (or listed above)	0	
			1
ine 10: Total Rece	ipts \$50 and under* (not listed above)	0	
ing 11, TOTAL F	RECEIPTS IN THE PERIOD	0], , , , , ,
ine 11; 101AL F	CCEIT IS IN THE PERIOD		← 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)

Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
Line 9: Total Recei	pts over \$50 (or listed above)	0			
Line 10: Total Rece	ipts \$50 and under* (not listed above)	0			
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2		
* If you have itemized	receipts of \$50 and under, include them in line	9 Line 10 shoul	I 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.Q.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.)

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		7		
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		THE CONTRACTOR OF THE CONTRACT		
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		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		7 10 m 15 m	0 1 1 2 /	
		Line 13: Total Expenditures \$50	J and under* (not listed above)	
	Tutou on 1 12 4 S	Line 14: TOTAL EXPENDIT	IIDEC IN THE DEDIOD	
			hould include only those expenditures	L

^{*} 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Dunness of Ermandituus	A a
Date 1 alu	(aiphabetical listing)	Address	Purpose of Expenditure	Amount
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	,			
	:			
		Line 12. Evnandituras acces 650) (as listed above)	
		Line 12: Expenditures over \$50	(or fisted above)	0
		Line 13: Expenditures \$50 and	under* (not listed above)	0
	Enter on page 1. line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0
TC 1 **		r, include them in line 12. Line 13 sl		L

^{*} 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 Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	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.

ate Incurred	To Whom Due	Address	Purpose	Amount
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1				
Market and an annual state of the state of t				
	Enter on page 1, line 7 →			