



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-24 Ending Date: 3-29-24

Type of Report: (Check one)

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

Martha Simon
Candidate Full Name (if applicable)
School Committee
Office Sought and District
5 Willow Way
Residential Address
Telephone Number (optional): 781-962-6176

Committee to Re-Elect Martha Simon
Committee Name
Monte Pearson
Name of Committee Treasurer
5 Willow Way, Burlington
Committee Mailing Address
Telephone Number (optional): 781-962-6176

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 5233.00</u>
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line 14)	<u>4802.70</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>430.30</u>
Line 6: Total in-kind contributions this period (page 6)	<u>400.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0.00</u>
Line 8: Name of bank(s) used:	<u>TD Bank</u>

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: Monte Pearson (Treasurer's signature) Date: 3-29-24

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: Martha A. Simon (Candidate's signature) Date: 3-29-24

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 attached		
Line 9: Total Receipts over \$50 (or listed above)		3984	
Line 10: Total Receipts \$50 and under* (not listed above)		1249	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5233	← 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

M. Simon

Date	Name	Address	Amount	Occupation & Employer
1/25/2024	Barbara Alten	4 Albion Road, Billerica MA 01821	54	
2/23/2024	Rosalie Blum	11 Humboldt Ave, Burlington MA 01803	100	
2/4/2024	Robert Buckley	188 North St., Apt 31, Boston MA 02113	250	lawyer, Reimer and Braunstein
1/30/2024	John Dabrowski	1 Sheldon St., Burlington MA 01803	54	
2/22/2024	Liz DiTucci	6 Ridgewood Lane, Burlington MA 01803	100	
2/7/2024	Shari Ellis	3 Hickory Lane, Burlington MA 01803	100	
1/13/2024	Myrna Ezersky	160 E. 65th St., Apt. 6D, NY, NY 10021	100	
1/5/2024	Peter Ezersky	PO Box 1919, Amagansett, NY 11930	100	
1/27/2024	Andy Feit	31 Manderville Rd, W Harwich, MA 02671	54	
2/7/2024	Robin Frisch	16 Oheir Way, Lowell MA 01852	100	
1/2/2024	Andy Gianino	31 Sycamore Circle, Belchertown MA 01007	100	
1/2/2024	Jane Ezersky Kastan	25 Claremont, NY, NY 10027	100	
1/25/2024	John Kelly	14 Oxbow Lane, Burlington MA 01803	100	
2/29/2024	Judy Kravitz	12 Robinson Drive, Bedford MA 01730	100	
2/17/2024	Barbara L'Heureux	10 Woodside Lane	100	
2/15/2024	Rose Manni	13 Kingsdale St., Burlington MA 01803	150	
1/2/2024	Mark Neidergang	29 Conwell St, Somerville MA 02143	100	
1/2/2024	Tom Phillips	3563 Grand Valley, Canal Road, Palisade CO 81526	200	retired
1/21/2024	Martha Rogers	24 Rockaway Lane, Arlington MA	100	
3/5/2024	Rhonda Rubin	44 Fairmeadow Rd, Wilmington MA 01987	54	
1/2/2024	Evan Sagerman	114 Guerrero St, San Francisco CA 94110	100	
1/2/2024	Jason Sagerman	1244 Rydell Rd, Rydell PA 19046	100	
2/8/2024	Myrna Saltman	15 Greystone Court, Burlington MA 01803	54	
1/29/2024	Ben Silver	84 Cedar St, Waltham, MA 02453	54	
3/16/2024	Martha Simon	5 Willow Way, Burlington MA 01803	700	retired
1/6/2024	Peggy Simon	1836 Belburn Dr, Belmont, CA 94002	100	
1/27/2024	Wendy Simon-Pearson	3619 Georgia Ave NW, 202, Washington, DC 20010	100	
2/21/2024	Paul Stein	4 Park Rd, Unit 1, Winchester MA 01890	100	
2/15/2024	Kevin Sullivan	14 Frothingham Rd, Burlington MA 01803	150	Undertaker, Sullivan Funeral Home
2/29/2024	Chris Warren	29 Greenwood Rd, Burlington MA 01803	60	
2/24/2024	Schiffon Wong	3 Haven Terrace, Burlington MA 01803	250	Executive Researcher, EMD Serono
1/4/2024	Carol Woolfe	10 Brandywyne, Wayland MA 01778	100	
			3984	

P.2 attached

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.)

[illegible]

Line 12: Total Expenditures over \$50 (or listed above)

4393.76

Line 13: Total Expenditures \$50 and under* (not listed above)

408.94

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

4802.70

* 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

M. Simon

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
2/15/2024	Connolly	178 Gill St, Woburn 01801	lawn signs	956.46
3/18/2024	Connolly	178 Gill St, Woburn 01801	postcard mailing	\$1,741.84
1/17/2024	USPS	5 Bedford St, Burlington 01803	stamps	66
3/1/2024	Vistaprint	www.vistaprint.com/oh/	postcard mailing	1629.46
				4393.76

p. 4 attachment

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
1-10-24	Sally Willard		Website creation + domain	\$200
3-25-24	Golden Cannoli Shells Company	99 Crescent Ave Chelsea, MA 02150	Cannolis	\$200
Line 15: In-Kind Contributions over \$50 (or listed above)				\$400.00
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Line 17: TOTAL IN-KIND CONTRIBUTIONS				\$400.00

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 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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			

← 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 B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.