

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

BARNSTABLE TOWN CLERK 2015 NOU 12 PM12:28

| th: Town Clerk or Election Commission Please print o | r type all information, except sigr | natures. | * |
|--|---|--|---|
| ll in dates: Month Date eporting Period Beginning | Year Ending | Month Date | Year |
| ype of report: (Check one) 8th day preceding preliminary □8th day pre | ceding election □30 day after e | election | port |
| Full Name of Candidate (if applicable) Barnst-ble Schoo Committee Office Sought and District North Residential Address Marchan Mills W Tel. No. (c) | Name Com | Committee Name of Committee Treasurer mittee Mailing Address Tel. | No. (optional) |
| Line 1: Ending balance: Line 2: Total receipts the Line 3: Subtotal (line 1 plus Line 4: Total expenditur Line 5: Ending balance Line 6: Total in-kind cont Line 7: Total (all) outstan Line 8: Name of bank(s) | is period (page 2, line 11) s line 2) res this period (page 3, line (line 3 minus line 4) ributions this period (page dding liabilities (page 4) | \$ | 二 <u>ゴ</u> : 73 |
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached s finance activity, including all contributions, loans, receipts, ex campaign finance activity of all persons acting under the auth Sig | chedules and it is, to the best of my knowle openditures, disbursements, in-kind contribu ority or on behalf of this committee in accor- ned under the penalties of perjury: | dge and belief, a true and compitions and liabilities for this reportance with the requirements of l | ete statement of all campa ring period and represents VLG.L. c. 55. |
| Treasurer's signature (in ink) | | Date | |

| Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee Candidate with Committee and no activity independent of the committee Candidate with Committee and no activity independent of the committee in accordance with the requirements of M.G.L. c. 55. I have not received any 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 filling separate report Candidate without Committee OR Candidate with Independent activity filling 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 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 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 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 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 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 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 I certify that I have examined this report including attached schedu |
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| C. Attended to the second of t |
| 11/18/17 |

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 lumize 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.

This page may be copied 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) | Amo | unt | Occupation & Employer (for contributions of \$200 or more) |
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| | =11 | | | - Anna |
| | otal receipts in excess of \$50 (or listed above) | | | |
| | otal receipts \$50 and under* (not listed above) | 7 | | |
| Line 11: 7 | OTAL 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.

Page 2

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.

This page may be copied 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) | | Purpose of Expenditure | Amo | uni |
|-----------|-------------------------------------|------------------|------------------------------|-------|--|
| 10/10/15 | Big Duddy's Signs | St 2 Lucinia, NH | Signs | 483 | 7 |
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| * | t a | | Expenditures over \$50 | | |
| 77 | tor on mace 1 11 4 | | Expenditures \$50 and under* | | |
| | iter on page 1, line 4 | Line 14:7 | COTAL EXPENDITURES | 483 7 | 1 |

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

Page 3

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.

| Date Received | From Whom Received* | Residential Address | Description of Contribution | Value |
|------------------|-------------------------|---------------------|-----------------------------|-------|
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| (A.) | | | 1 H | |
| | | z. | | |
| | | Line 15: | In-kind over \$50 | |
| | 0 2 | Line 16: | In-kind \$50 and under | |
| | Enter on page 1, line 6 | Line 17: | Total In-kind | |

^{*} 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 |
|------------------|-------------------------|----------------------|-------------------|--------|
| 10/14/15 | Christopher J. Joyce | Morstons Mills Mt | Signs. | 483.73 |
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| 14 | - | | | - FE |
| | Enter on page 1, line 7 | Line 18: OUTSTANDING | LIABILITIES (ALL) | 483.73 |

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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