

# Form CPF M 102: Campaign Finance Report Municipal To **Municipal Form**

Office of Campaign and Political Finance

r				ile with: City or Town Cle	rk or Elect	tion Commission
Fill in Ro	eporting Period dates: Beginning Date:	10/26/2021	Ending D	Date: 12/31/2021		****
Type of	Report: (Check one)	., , ,				
* ^	y preceding preliminary 8th day preceding election	on [] 30 c	lay after election	year-end report	☐ di	ssolution
Paula Sch	nnepp Candidate Full Name (if applicable)	Com	mittee to Elect Paul	a Schnepp Committee Name		
Municipal,	, Barnstable	Robe	rt Bucchianeri			
	Office Sought and District			ne of Committee Treasurer		
956 River	Road, Marstons Mills, MA 02648  Residential Address	<u> </u>	River Road, Marstor	ns Mills, MA 02648 mmittee Mailing Address		
E-mail:	paulabarnstable@gmail.com	E-mai		rjbucchia@gmail.cor	n	
Phone # (opt		Phone	# (optional):			
L	SUMMARY BALA	NCE INE	ORMATION:			]
	Line 1: Ending Balance from previous report			.04		
	Line 2: Total receipts this period (page 3, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 5, line 1)			\$0.	.00	
				\$3,347.	.04	
			AND RESIDENCE AN	\$0.	.00	
	Line 5: Ending Balance (line 3 minus line 4)	· · · · · · · · · · · · · · · · · · ·		\$3,347.	.04	
	Line 6: Total in-kind contributions this period	l (page 6)		\$0.	.00	
	Line 7: Total (all) outstanding liabilities (page	e 7) ———		\$1,892.	.16	
	Line 8: Name of bank(s) used: Eastern Bank					
I certify that I activity, inclu	Committee Treasurer:  I have examined this report including attached schedules and it is, to the ding all contributions, loans, receipts, expenditures, disbursements, intro of all persons acting under the authority or on behalf of this committed.	kind contribution	ns and liabilities for this	reporting period and repres		
Signed under	r the penalties of perjury:	نب	(Treasurer's	signature) Date:	1/28	12022
FOR CAN	IDIDATE FILINGS ONLY: Affidavit of Candidate: (check	1 box only)				
I certify activity,	ate with Committee that I have examined this report including attached schedules and it is, of all persons acting under the authority or on behalf of this committee any liabilities nor made any expenditures on my behalf during this repo	in accordance v	with the requirements of	M.G.L. c. 55. I have not rec		
I certify t	ate without Committee that I have examined this report including attached schedules and it is, activity, including contributions, loans receipts, expenditures, disburses in finance activity of all persons activity under the authority or on behalf	ments, in-kind c	ontributions and fiabilitie	es for this reporting period a requirements of M.G.L. c. 5	ınd represe	
Signed under	the penalties of perjury:		(Candidate's	signature) Date: _	1/2	2/2022

#### 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)
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At the state of th			
ine 9: Total Receip	ts over \$50 (or listed above)		
,	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
	THE I BRIDE	0 Line 10 abov	← Enter on page 1, line 2

<sup>\*</sup> 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)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		***************************************	
***************************************		and the state of t	
Line 9: Total Receip	ots over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		Enter on page 1, line 2

<sup>\*</sup> 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.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.)

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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		***************************************			
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				I.	
		Line 12: Total Expenditures ov	er \$50 (or listed above)		
		Line 13: Total Expenditures \$50			
		Line 13. Total Expenditures \$30	and under (not listed above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD		
If you have itemized expenditures of \$50 and under include them in line 12. Line 13 chould include only those expenditures not itemized					

<sup>\*</sup> 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	Purpose of Expenditure	Amount	
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777700000000000000000000000000000000000					
		·			
		Line 12: Evnandituma avan \$50	(or listed shove)	The state of the s	
	Line 12: Expenditures over \$50 (or listed above)  Line 13: Expenditures \$50 and under* (not listed above)				
	<b>.</b>				
		Line 14: TOTAL EXPENDIT			

<sup>\*</sup> 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)	
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

<sup>\*</sup> 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
		]		
	·			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	