

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

ile with: City or Town Clerk or Election Commission Please print or type all information, except signatures.	
Fill in dates: Reporting Period Beginning 10 26 2013 Ending 12 31 FIRSTABLE TO	DWN CLEI
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election □30 day after election ⊠year-end report □dissolution	
Full Name of Candidate (if applicable) Town Chuncil Precinct II Office Sought and District S30 Parker Pd Liest Barnstable MA Residential Address Tel. No. (optional) Committee to Elect thil Wallazer JAN 6 Committee Name Terry H Wargin Name of Committee Treasurer Po Box 579 West Barnstable MA Committee Mailing Address O2468 Tel. No. (optional)	19:10
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used (boperative Bank of Ape Cod	
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: 12 31 30-13 Treasurer's signature (in ink)	
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)	
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 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 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: Date	

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.

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		Amount		Occupation & Employer (for contributions of \$200 or more)
11/7/13	Capizzi Mary, 1645 Santoit Newtown Rd. Cotoit MH 02635	100	ળ્યે	
	•			
:				
·				
Line 9:	Total receipts in excess of \$50 (or listed above)	100	00	
Line 10:	Total receipts \$50 and under* (not listed above)	0	00	
	TOTAL RECEIPTS IN THE PERIOD	100	00	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.

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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

umber on eac Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
11/5/13	golf Club Philbricks	11/41 21015 11/11 51016 12/11		898	00
1/5/13	Christine Jenkins	2040 Figurn ough Rd. West Barnsteble MA 2066	Poll data input	120	ળ
11/5/13	Jil Inkins	2540 Tyannoush RO Wist Barnslade MH 02168	Poll data input	120	જ
11/18/13	Oceans the bosicle	235 acean Street HyannismA Osbol	Reception	300	oc
10/28/13	Staples	364 Barnsteble Rel Hyannis MH OXOI	Ink Chrtridge	53	1/
·			·		
		Line 12:	Expenditures over \$50	1391	11
		Line 13:	Expenditures \$50 and under*	58	77
	Enter on page 1, line 4	Line 14	:TOTAL EXPENDITURES	1449	88

^{*}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 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
		· · · · · · · · · · · · · · · · · · ·		
	e e e			
	· · · · · · · · · · · · · · · · · · ·			
		Line 15:	In-kind over \$50	
		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	Amou	int
	Philip n. Wallace	530 Marky Rd West Barnstable MHOXUS	Loan	1020.	oc
	·				
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	1000	.α

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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