

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

2015 OCT 19 am9:35 BARNSTABLE TOWN CLERK

City or Town Clerk or Election Commission

Please print or type all info	formation, except signatures.
Fill in dates: Reporting Period Beginning / / / / / / / / / / / / / / / / / / /	Ending 10 26 13
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding elections.	on 30 day after election 9 year-end report dissolution
Full Name of Candidate (if applicable) Balastane School Commuter Office Sought and District 58 South Residential Address Octol Ville MH, 02655 508 364-34 Fel No. (optional)	Committee Name Name of Committee Treasurer Committee Mailing Address Tel. No. (optional)
STIMMARY RALA	NCE INFORMATION:
Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions Line 7: Total (all) outstanding liabil Line 8: Name of bank(s) used	evious report I (page 2, line 11) Seriod (page 3, line 14) s line 4) this period (page 4) S S S S S S S S S S S S S
finance activity, including all contributions, toars, receipt, experiments, campaign finance activity of all persons acting under the authority or on behalf signed under the particular to the finance of the signed under the particular to the finance of the signed under the particular to the signed under the signed under the particular to the signed under the signed unde	is, to the best of my knowledge and belief, a true and complete statement of all campaign sursements, in-kind contributions and liabilities for this reporting period and represents the of this committee in accordance with the requirements of M.G.L. c. 55. Date SONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee and it certify that I have examined this report including attached schedules and it finance activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf of the contributions.	sittee is, to the best of my knowledge and belief, a true and complete statement of all campaign a committee in accordance with the requirements of M.G.L. c. 55. I have not received any all during this reporting period. Wity filing separate report It is, to the best of my knowledge and belief, a true and complete statement of all campaign arrangements, in-kind contributions and liabilities for this reporting period and represents the alf of this committee in accordance with the requirements of M.G.L. c. 55.

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 tumize 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)		unt	Occupation & Employer (for contributions of \$200 or more	
	, 9				
				15	
				N.	
-			0	90	
	Ni .			ji	
				*	
	, 9				
	5 a l a g				
	tal receipts in excess of \$50 (or listed above)				
Line 10: To	otal receipts \$50 and under* (not listed above)				
Line 11: TO	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)	Address	Purpose of Expenditure	Amou	int
115/15	Big Padaly S	Caconia NH	Signs	500	á
	.85				
12	*		102		
		€			
	8		0		
	Ж	#* B			
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	Sec.				
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	<u>E</u>			, .	
	9				8_
			Expenditures over \$50		
	Enter on page 1, line 4		Expenditures \$50 and under* :TOTAL EXPENDITURES		

^{*}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
	Aluman .			
		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	Amount
115/15	Patrick Mrghy	38 South St	loan to campa	in Too
-				
				E
2				
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	J