



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BARNSTABLE
TOWN CLERK

19 OCT 25 11:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/10/2019 Ending Date: 10/25/2019

Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Kathleen M. Bent
Candidate Full Name (if applicable)
School Committee - Barnstable
Office Sought and District
116 Shallow Pond Drive, Centerville, MA 02632
Residential Address
E-mail: kmbent@yahoo.com
Phone # (optional): (508) 362-1288

Committee to Elect Kathy Bent
Committee Name
Nora Monteiro
Name of Committee Treasurer
116 Shallow Pond Drive, Centerville, MA 02632
Committee Mailing Address
E-mail: BentForBarnstable@gmail.com
Phone # (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	560
Line 3: Subtotal (line 1 plus line 2)	560
Line 4: Total expenditures this period (page 5, line 14)	450
Line 5: Ending Balance (line 3 minus line 4)	110
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	<u>First Citizens' Federal Credit Union</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 of/on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: _____ (Treasurer's signature) Date: 10/25/2019

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Kathleen Bent (Candidate's signature) Date: 10/25/2019

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)
10/10/2019	Linda Letourneau 572 Cotuit Road Marstons Mills, MA 02648-1582	500	Teacher, Mass Maritime Academy
10/14/2019	Paul Revere & Stasia Revere 226 Riverview Lane Centerville, MA 02632	60	
Line 9: Total Receipts over \$50 (or listed above)		560	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		560	← 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.

