Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Fill in Re	porting Period dates:	Beginning Date:	10/14/23	Ending 1		City or Town Cler 10/30/23	rk or Election Commissi 3
Tune of R	Report: (Check one)						
1	•	etrope					
∐ 8m day	preceding preliminary	8th day preceding election	☐ 30 da	ay after election	□ уеа	ar-end report	dissolution
	Paul J.Phalan	- Marie II de la Companya de la Comp					The state of the s
	Candidate Full Name (in	if applicable)	-		Commit	ttee Name	
E	Barnstable Town Council - Pr						
]	Office Sought and	District		Na	me of Com	mittee Treasurer	
-	48 No. Precinct Rd. Residential Add	Arago	_		-itaa N	Iniling Address	
E-mail:	phalanpaul@		E-mail:		omminee ivi	ianing Address	
Phone # (option			-	(optional):	-		<u> </u>
<u></u>		***************************************					
		SUMMARY BALAN	CE INFO	ORMATION:			
	Line 1: Ending Balar	nce from previous report			(the second control of the second	0.00	
	Line 2: Total receipts	s this period (page 3, line 1)	1)			1,711.95	5
THE PROPERTY OF THE PERSON OF	Line 3: Subtotal (line	2 1 plus line 2)				1,711.95	5
	Line 4: Total expend	litures this period (page 5, li	ine 14)		e7 min-maker to reason and a second a second and a second and a second and a second a second a second a second	1,711.95	5
	Line 5: Ending Balan	nce (line 3 minus line 4)			moving Sunt Windows (Sunt Option)	0.00	
	Line 6: Total in-kind	contributions this period (p	page 6)			0.00	
	Line 7: Total (all) out	ststanding liabilities (page 7)	')		Att of Cold mings in adults analysis	0.00	
	Line 8: Name of bank	k(s) used: N/A					
I certify that I hat activity, including finance activity of Signed under the	ng all contributions, loans, receipts, of all persons acting under the auth- the penalties of perjury:	attached schedules and it is, to the best, expenditures, disbursements, in-kind harity or on behalf of this committee in the	d contributions in accordance v	s and liabilities for this	of M.G.L. c.	seriod and represen	all campaign finance ats the campaign
Candidate I certify that activity, of a	with Committee at I have examined this report include all persons acting under the authori	iding attached schedules and it is, to the rity or on behalf of this committee in a tures on my behalf during this reportin	he best of my k	th the requirements of i	M.G.L. c. 5:	I have not recei	t of all campaign finance ived any contributions,
I certify that	ivity, including contributions, loans,	iding attached schedules and it is, to the street of the s	its, in-kind con his candidate in	stributions and liabilitie	es for this re	eporting period and its of M.G.L. c. 55,	d represents the
Signed under th	he penalties of perjury:	for Phul		(Candidate's	signature)	Date: _ 1	10/30/23

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.)

- K v mit without	To Whom Paid	mittee name and a page number on	reen hages)	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
10/14/23	Fed Ex Office	297 North St. Hyannis, MA 02601		266,58
10/14/23	Fed Ex Office	297 North St. Hyannis, MA 02601		94.56
10/16/23	Vistaprint			218.65
10/16/23	Vistaprint			239.04
10/16/23	Vistaprint			523.90
10/19/23	Fed Ex Office	297 North St. Hyannis, MA 02601		369,22
		Line 12: Total Expenditures over	er \$50 (or listed above)	1,711.95
		Line 13: Total Expenditures \$50	and under* (not listed above)	0.00
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	JRES IN THE PERIOD	1,711.95

^{*} 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 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.)

	Please include your committee name and a p Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(in form many of 411)
0/14/23	Paul Phalan 48 No. Precinct Rd.	361.14	
J/14/23	Centerville, MA 02632		
		004 50	
		981.59	
		369.22	
100000000000000000000000000000000000000			
	1/4		
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		And the state of t	
<u>L</u>			
Line 9: Total Re	eceipts over \$50 (or listed above)	1,711.95	<u> </u>
	eccipts \$50 and under* (not listed above)	6,06	ob old of the state of the stat
Line 11. TOTA	L RECEIPTS IN THE PERIOD	1,711,95	Appers the matter? Entter C age 1 line 2 to age 1 line 2 to age 1 line 2 to age 1 line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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	The second secon		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		1	
	s over \$50 (or listed above)		
ne 10: Total Receipt	ts \$50 and under* (not listed above)		
ne 11: TOTAL RE	CEIPTS IN THE PERIOD		5 Page 1 2 2
	ceipts of \$50 and under include them in line		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.