

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

BARNSTABLE TOWN CLERK

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Please print or type all information, except signature	es.	
Fill in dates: Reporting Period Beginning 09 - ZO - ZO 3 Ending 10		Year 2013
Type of report: (Check one) □8th day preceding preliminary Sth day preceding election □30 day after election	on □year-end report	□dissolution
Write-in Condidate Housingffice push in District 245 Par Ker Rd. Name of Cor	mmittee Name mmittee Treasurer Mailing Address Tel. No. (o	ptional)
SUMMARY BALANCE INFORMATION Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11)	N: \$ 00'00 \$ 344'63	
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)	\$ 344.63	
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 Capital One	\$ \$	
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 be finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with Signed under the penalties of perjury:	liabilities for this reporting per	iod and represents the
Treasurer's signature (in ink)	Date	
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST	ST 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 it finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the recontributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and it finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and it campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance we signed under the penalties of perjury:	equirements of M.G.L. c. 55. If belief, a true and complete state liabilities for this reporting peri	ment of all campaign od and represents the c. 55.
Candidate signature (in ink)	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 Name and Residential Address Received (alphabetical listing required)		Amount		(for contributions of \$200 or more)	
10/08/	2013 Ronald Beaty, Jr. 24 & Parker Rd West Barnstable, MA	344	63	Loan from Candidate to self	
	West Darns Table,			•	
	·				
Line 9:	Total receipts in excess of \$50 (or listed above)	344	63		
Line 10:	Total receipts \$50 and under* (not listed above)	- , ,			
Line 11:	TOTAL RECEIPTS IN THE PERIOD	344	63	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 number on each page.

Enter on page 1, line 4 Line 14:TOTAL EXPENDITURES		344	63		
		Line 13: I	Expenditures \$50 and under*		
		Line 12: I	Expenditures over \$50	344	63
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		7	NAT THE RESERVE OF THE PERSON		
10/11/13	USPS	385 Main St Hyannis, MA	postage	230	00
0/10/13	Town of Barnstable USPS	367 Main St Hyannis, MA 385 Main St	Voter lists	40	06
	Town of	390 Barnstake Hyannis MA 364 Barnstake Hyannis MA		53	13
iolealis	Staples	3 64 Barushall	Capies	5 2	
10/08/13	Ocean State Job Lot Staples	390 Barnstakk	Envelopes	21	Se
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	ount

^{*}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
	·			
		:		
		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
E	nter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

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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