

Form CPF M 102: Campaign Finance Report **Municipal Form**

2014 JAN 21 AM10 10

Office of Campaign and Political Finance

Commonwealth f Massachusetts	File with: City or Town Clerk or Election Communiss
Fill in Reporting Period dates: Beginning Date:	
Γype of Report: (Check one)	election 30 day after election year-end report dissolution
Ronald R. Beaty Jr. Candidate Full Name (Fapplicable)	Committee Name
Write-in Candrate Housing A Office Sought and District	Authority Name of Committee Treasurer
245 Parker Rd. W. Barustal Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BA	BALANCE INFORMATION:
Line 1: Ending Balance from previous rep	report 00.00
Line 2: Total receipts this period (page 3,	
Line 3: Subtotal (line 1 plus line 2)	270161
Line 4: Total expenditures this period (pa	
Line 5: Ending Balance (line 3 minus line	ine 4) 00100
Line 6: Total in-kind contributions this po	period (page 6)
Line 7: Total (all) outstanding liabilities (s (page 7)
Line 8: Name of bank(s) used:	apital One
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is activity, including all contributions, loans, receipts, expenditures, disbursement finance activity of all persons acting under the authority or on behalf of this contributions.	it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance ments, in-kind contributions and liabilities for this reporting period and represents the campaign s committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate:	ie: (check 1 box only)
Candidate with Committee and no activity independent of the comm I certify that I have examined this report including attached schedules an activity, of all persons acting under the authority or on behalf of this comincurred any liabilities nor made any expenditures on my behalf during the	and it is, to the best of my knowledge and belief, a true and complete statement of an employment and it is, to the best of my knowledge and belief, a true and complete statement of an employment of mind it.
	ctivity filing separate report and it is, to the best of my knowledge and belief, a true and complete statement of all campaign disbursements, in-kind contributions and liabilities for this reporting period and represents the babelalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury.	(Candidate's signature) Date: 61/18/20

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.)

Name and Residential Address Occupation & Employer					
Date Received			(for contributions of \$200 or more)	,	
10/25/2013	Rongld Beaty, In 245 Parkst Rd W Banys to Spe 4A	\$270761	Loan from Candidat to Self- (Student	te)	
Line 9: Total Rece	ipts over \$50 (or listed above)	270'6			
Line 10: Total Reco	Line 10: Total Receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD 270'61 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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Rece	sipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	e 9 Line 10 show	Enter on page 1, line 2 Id include only those receipts not itemized above

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above

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.)

report all expenditures. Please include your committee name and a page number on each page.)					
Data Badd	To Whom Paid	Address	Purpose of Expenditure	Amount	
Date Paid	(alphabetical listing)			Amount	
10/25/2013	Vistaprint	15 Hayden Ave Lexing ton, MA	Post Cards	121.55	
	U.s. Postal Service	385 Main St Hyannis, MA		99 2	
10/25/201	Barnstable Patriot	4 Ocean St Hyannis, MA	Small Display Ad.	50 %	
		Line 12: Total Expenditures over	er \$50 (or listed above)	2706	
Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 276				270:61	

^{*} 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
				:
		Line 12: Expenditures over \$50) (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
		Line 15: In-Kind Contributions	s over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 →	nter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} 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.

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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
	Enter on page 1 line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	