

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

BARNSTABLE TOWN CLERK

Office of Campaign and Political Finance

2019 NOU 27 am11:32

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/26/19 Ending Date: 11/26/19					
Type of Report: (Check one)  Sth day preceding preliminary Sth day preceding election 30 day after election year-end report dissolution					
Gordon In Star  Candidate Full Name (if applicable)  Town Councider Precent  Office Sought and District  St. P. Lots Way, W. Barnsteble MA  Residential Address  E-mail: gordon Star for Town Councilor  Committee Name  Sherry F. Greene- Starr  Name of Committee Treasurer  85 P. Lots Way, W. Barnsteble MA  Residential Address  E-mail: gordon-m-Starr of amail. Com  Phone # (optional): 774 368 0936					
SUMMARY BALANCE INFORMATION:					
Line 1: Ending Balance from previous report  3372.33					
Line 2: Total receipts this period (page 3, line 11)					
Line 3: Subtotal (line 1 plus line 2)  3847.33					
Line 4: Total expenditures this period (page 5, line 14)					
Line 5: Ending Balance (line 3 minus line 4)					
Line 6: Total in-kind contributions this period (page 6)					
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: The Cooperative Bank of Cape Cod					
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 or 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: 1/26/19					
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I 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:					

#### **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)
W/22/19	Kent Kannenberg 3945 Main St Barnstable, MM	\$ 25	
11/2/19	Alfred Kobacker 2849 Main St. Barnstable, smi	4 150	
11/2/19	Brian O' Malley 556 Communicial St. Provincetown, MA	\$ 100	
10/28/19	Al Suprenant 202 Bridge St. Ostervilk, 1991	\$ 250	
Line 9: Total Recei	pts over \$50 (or listed above)	525	
Line 10: Total Recei	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	\$525 <del>.</del>	Enter on page 1, line 2

<sup>\*</sup> 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 (continued)**

11/4/14 C	To Whom Paid (alphabetical listing)  SJs Wholesale Club	Address 420 Attuchs Lane	Purpose of Expenditure	Amount
11/4/14 C	3Js Wholesalc Club	420 Attucks Lane		
11/4/14 C		Nyannis, MA	food for Campaign	\$ 33.86
11/4/11 S	Cape Cod Beer	1336 Phinneys Lane thy annis, MA	Venine for Campaign event, etc.	\$ 303.00
14/26/15 C	Julie Jones	2514 Main St. W Barnstzble, MA	Teimbrise for food for campaign event	\$100.00
11/4/11 S	Chloe Starr	1000 Main St. W Barnstable, MA	reimburse/parment Oysters a shucking for Campaign event	\$ 100.00
11/6/14	Gordon Starr	85 Pilots Way W Barnstable, IMI	reimbourse Staples expenses and food for campoign	\$ 130.27
	Sordon Starr	88 P.lats Wax W Barnstable, MA	remburse campaign lean	\$ 500.00
	horny Greene. Stan	85 Pilots Way W Barnstably MM	reimburse for BJs for campaign food	£203.19
holy S	Sherny Greene-Star	85 Pilots Way W Barnstable, MA	remomentar usps	\$ 55.00
10/31/17	Sunderland Printing	115 Enterprise Rd Thyronis, MA	campaign signs 'vote today'	\$170.00
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Line 12: Expenditures over \$50 (or listed above)				1595.32
Line 13: Expenditures \$50 and under* (not listed above)				8
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD \[ \sqrt{5.32}				

<sup>\*</sup> 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
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Address de marches de la constante de la const				
1				
Line 15: In-Kind Contributions over \$50 (or listed above)			6	
Line 16: In-Kind Contributions \$50 & under (not listed above)				8
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				ð

<sup>\*</sup> 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
2000				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	OING LIABILITIES (ALL)	<b>か</b>