



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/1/23 Ending Date: 10/30/23

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

ERIC R. STEINMILBER
Candidate Full Name (if applicable)
TOWN COUNCILOR - PRECINCT 2
Office Sought and District
399 BISHPES TOWER WYANNIS MA 02601
Residential Address
 E-mail: ERSTEINMILBER@GMAIL.COM
 Phone # (optional): _____

STEINMILBER COMMITTEE
Committee Name
JENNIFER STEINMILBER
Name of Committee Treasurer
PO BOX 974, BARNSTABLE MA 02630
Committee Mailing Address
 E-mail: ERSTEINMILBER@GMAIL.COM
 Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>5,449.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>5,449.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1,737.63</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>3,711.37</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>2,966.20</u>
Line 8: Name of bank(s) used:	<u>TD</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 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: 10/30/23

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: _____ (Candidate's signature) Date: 10/30/23

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)
9/8/23	MIKE COAN 8 GUSSEY AVENUE RD WASHINGTON 01748	500	PRESIDENT COAN CAPITAL
9/9/23	CHRIS COAN 116 FLAVOUR RD WESTBOROUGH 01581	500	PRESIDENT CONSULT MANAGEMENT
9/9/23	GREGG LISCIOTTI 83 ORCHARD HILL LEANSIDE 01453	1000	PRESIDENT LISCIOTTI DEVELOPMENT
9/15/23	REB CHAMBERLAIN SCASIDE AVE DENNIS 02638	500	ATTY. CHAMBERLAIN LAW GROUP
9/29/23	CHRIS JOYCE 45 WHEELER RD WINDERS MILLS 02648	150	
10/2/23	RICK BENDISAN 246 OCEAN AVE COAST 02635	200	PRESIDENT DIVERSIFIED FUNDING
10/2/23	DANE COLUMBO 5 OPEN SPACE DR. SANDWICH 02563	500	OWNER RESTAURANTS
10/10/23	RUTH ANN CARNEY 33 BROAD ST. BOSTON 02109	500	RETIRED
10/10/23	STEVE COSTELLO 255 JUDDOCK RD OSTEONVILLE 02655	50	
10/11/23	ROY CARTERMAN 190 COMMONS RD COASTVILLE 02632	100	
10/12/23	MIKE DOND PO BOX 212 WYANNISPORT 02647	150	
10/12/23	JULIA PLUMS PO BOX 444 COMMAQUID 02637	250	RETIRED
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← 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)
10/12/23	ALAN HORVITZ 66 WOLLY POINT RD CENTONVILLE OH 43022	199	
10/12/23	DAVID LAWLER 962 MAW ST OSTONVILLE OH 43065	100	
10/12/23	DUN LYND E 126 LAKE SHORE DR MANSION MILLS OH 43048	200	RETIRED
10/23/23	CHARLY BOTSIVALES PO BOX 761 W. YAMUNDA OH 43073	500	PRESIDENT BOTSIVALI COMP
Line 9: Total Receipts over \$50 (or listed above)		5,399	
Line 10: Total Receipts \$50 and under* (not listed above)		50	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5449	← 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 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/21/23	L & A EVENTS	PO BOX 291 CENTONVILLE 02632	CAMPAIGN COST RENTAL DEPOSIT	225
9/29/23	RENOVATION PRESS	301 COURT ST. PLYMOUTH 02360	CAMPAIGN MAILER	1012.63
10/24/23	DISCUSSION PERFORMED	710 PENNSYLVANIA AVE D.C. 20004	CAMPAIGN ADS	500
Line 12: Total Expenditures over \$50 (or listed above)				1737.63
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				1737.63

* 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 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
9/5/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign supplies POSTAGE	1,275
9/5/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign supplies PRINTING	453.56
9/6/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign supplies MAILING	138.06
9/23/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign supplies PRINTING	548.97
10/6/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign supplies PRINTING	175.61
10/12/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign event CATERING	175.00
10/12/23	ERIC STEINWILBER	399 BISHOPS RD 02601	Campaign event RENTAL	200.00
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	2,966.29