



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: 7/20/19 Ending Date: 10/23/19

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

Kristine P. Clark
Candidate Full Name (if applicable)
Town Counselor Precinct 11
Office Sought and District
398 Woodside Ad W. Barns MA 02668
Residential Address
E-mail: precinct 11 clark @ gmail . com
Phone # (optional): _____

Committee to Elect Kris Clark
Committee Name
Leonard Clark
Name of Committee Treasurer
P.O. Box 568 W Barns MA 02648
Committee Mailing Address
E-mail: precinct 11 clark @ gmail . com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 5125.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 5125.00</u> 19
Line 4: Total expenditures this period (page 5, line 14)	<u>720.00</u> OCT 25
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 4405.00</u> 19
Line 6: Total in-kind contributions this period (page 6)	<u>.00</u> 19
Line 7: Total (all) outstanding liabilities (page 7)	<u>.00</u> 19
Line 8: Name of bank(s) used:	<u>Cooperative Bank of Cape Cod</u>

BARNSTABLE
TOWN CLERK

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: [Signature] (Treasurer's signature) Date: 10/23/19

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: Kristine P. Clark (Candidate's signature) Date: 10/23/19

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)
8/19/19	Dolores Schermer 42 Williams Path W. Barnstable, MA 02668	100. ⁰⁰	
9/12/19	Louise Wesley 97 Cockle Cove Rd. Chatham, MA 02655	75. ⁰⁰	
9/13/19	Theresa Przybylowicz 111 Daniel Shays Hwy Belchertown, MA 01007	250. ⁰⁰	College Professor Springfield Tech Comm College
9/15/19	Fred Dempsey 48 Field Stone Rd. W. Barnstable, MA 02668	100. ⁰⁰	
9/21/19	Merrill Davis 660 Main St W. Barnstable, MA 02668	\$100. ⁰⁰	
9/22/19	Andre Sampou 375 Cedar St. W. Barnstable, MA 02668	\$100. ⁰⁰	
9/22/19	Steve Wallace P.O. Box 490 W. Barnstable, MA 02668	\$100. ⁰⁰	
9/22/19	Tom Jones 76 Deacon Court Barnstable, MA 02630	\$100. ⁰⁰	
9/22/19	Lisa Hendrickson 404 Cedar St W. Barnstable, MA 02668	\$100. ⁰⁰	
9/22/19	Joseph Gill 42 Burning Tree Ln. W. Barnstable, MA 02668	\$100. ⁰⁰	
9/22/19	Katrina Hannagan 5 Darby Way Osterville, MA 02655	\$100. ⁰⁰	
9/22/19	Diane Plover 207 Carlson Ln. W. Barnstable, MA 02668	\$100. ⁰⁰	
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)
9/22/19	Les Hemmilla 98 Governors Way W. Barnstable, MA 02668	\$200. ⁰⁰	Shellfish Farmer Barnstable Sea Farms
9/22/19	Lesley Wallace 305 Pine St. W. Barnstable, MA 02668	\$110. ⁰⁰	
9/23/19	Michael Princi 50 Links Ln. Marstons Mills, MA 02648	\$100. ⁰⁰	
9/25/19	James Dever 1 Sleepy Hollow Ln. Sandwich, MA 02563	\$100. ⁰⁰	
9/26/19	Diane Ross 39 Tower Hill Rd. Centerville, MA 02655	\$100. ⁰⁰	
9/26/19	Mark Begley 20 High St. W. Barnstable, MA 02668	\$200. ⁰⁰	Shellfish Farmer d/b/a Beach Point Oysters
9/26/19	Shauna Childs 124 Stony Cliff Rd. Centerville, MA 02632	\$100. ⁰⁰	
9/27/19	Mary Waldron 54 Sycamore St. Brockton, MA 02301	\$100. ⁰⁰	
9/28/19	Andrew Gottlieb 119 Pickeral Cove Rd. Marshpee, MA 02649	\$100. ⁰⁰	
10/1/19	Wayne Hayes 37 Anthony Dr. Hyannis, MA 02601	\$500. ⁰⁰	Shellfish Farmer d/b/a Wayne Hayes Seafoods
10/10/19	Judith Desroches 1525 Main St W. Barnstable MA 02668	\$100. ⁰⁰	
10/10/19	Penny Scott P.O. Box 786 W. Barnstable, MA 02668	\$200. ⁰⁰	Retired
10/10/19	Thomas Lancour 16 Jenkins Ln. W. Barnstable, MA 02668	\$100. ⁰⁰	
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.

