



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BARNSTABLE
TOWN CLERK

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures

13 SEP 19 A9:09

Fill in dates:

Reporting Period Beginning 08 28 2013 Ending 09 19 2013

Type of report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

MARK J. DESPOTOPULOS
Full Name of Candidate (if applicable)
BARNSTABLE TOWN COUNCIL PRE. 12
Office Sought and District
47 LAURIE LN
Residential Address
MARSTONS MILLS, MA 02648
Tel. No. (optional)

- SAME -
Committee Name
Name of Committee Treasurer
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
Line 2: Total receipts this period (page 2, line 11) \$ 27,098
Line 3: Subtotal (line 1 plus line 2) \$ 0
Line 4: Total expenditures this period (page 3, line 14) \$ 27,98
Line 5: Ending balance (line 3 minus line 4) \$ 0
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used CAPE COD 5

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.

Ando Despotopulos
Treasurer's signature (in ink)

Signed under the penalties of perjury:

09/18/2013
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST 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 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.

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 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

[Signature]
Candidate signature (in ink)

09/18/2013
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 Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
8/27 2013	MARK Despotovlos	27	98	
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		27	98	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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#210383

Order victorystore00-210383 for VictoryStore.com-
866-241-2295**Date** Wed Aug 28 10:55:22 CDT 2013**Ship to** Diane Scannell
108 Degross Rd.
Mashpee MA 02649
US United States
508-477-3771**Bill to** Same**E-Mail** dsbsd@comcast.net (emailed)**Via** FedEx Ground**Payment** MasterCard

Item	Code	Qty	Unit Price
Pair of EZ Sign Stakes http://store.yahoo.com/victorystore00/ezsignstakes.html	ezss03	10	1.00
4mm 24"W x 18"H Corrugated Plastic White OR Yellow Blanks - Wholesale Pricing! Color = White http://store.yahoo.com/victorystore00/24x18copl.html	24x18cp03	10	1.10
Subtotal			20.98
Shipping			7.00
Tax			0.00
Total			27.98

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
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			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
Enter 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.