



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2017 MAR 9 PM 12:30

BARNSTABLE TOWN CLERK

File with:

City or Town Clerk or Election Commission Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 1 Date 1 Year 2016 Ending Month 12 Date 31 Year 2016

Type of report: (Check one)

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

PHILIP M. WALLACE

Full Name of Candidate (if applicable)

TOWN COUNCIL

Office Sought and District

305 PINE ST

Residential Address

W. BARNSTABLE, MA 02668

508 367 1022 Tel. No. (optional)

COMMITTEE TO ELECT PHIL WALLACE

Committee Name

Name of Committee Treasurer

P.O. BOX 519

Committee Mailing Address

W. BARNSTABLE, MA 02668

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 319.78

Line 2: Total receipts this period (page 2, line 11) \$ 0

Line 3: Subtotal (line 1 plus line 2) \$ 319.78

Line 4: Total expenditures this period (page 3, line 14) \$ 250.00

Line 5: Ending balance (line 3 minus line 4) \$ 69.78

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 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 (in ink)

John Wallace

Date

3/6/17

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:

Candidate signature (in ink)

Philip M. Wallace

Date

3/6/17

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.

This page may be copied 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	
3/9/16	JAMES CROCKER		CAMPAIGN CONTRIBUTION	100	00
3/9/16	WILLIAM CROCKER		CAMPAIGN CONTRIBUTION	50	00
3/9/16	FRANCIS MANZELLI		CAMPAIGN CONTRIBUTION	50	00
4/3/16	TIMOTHY WHELAN		CAMPAIGN CONTRIBUTION	50	00
Line 12: Expenditures over \$50				100	00
Line 13: Expenditures \$50 and under*				150	00
Line 14: TOTAL EXPENDITURES				250	00

Enter on page 1, line 4

*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.

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	0

* 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)	0