

Form CPF M 102: Campaign Finance Report TABLE Municipal Form Office of Campaign and Political Finance

Massachusetts 12 JAN 10 P2:22	
le with: ity or Town Clerk or Election Commission Please print or type all information, except signatures.	
Fill in dates: Month Date Year Month Date Year Reporting Period Beginning 10 31 ZO11 Ending 1 31 ZO12	
Type of report: (Check one) 8th day preceding preliminary	tion
Committee Name Committee Treasurer Committee Treasurer P.O. SOX 1953 MYMMUS MA 07601 Committee Mailing Address Committee Mailing Address SO8-771-0644 Tel. No. (optional)	
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used ROCK LANT TRUST	
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 car finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represe 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:	mpaig
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 can	npaig

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.
Condidate 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:
1000000
Conditate almature to self
Date 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)		ount	Occupation & Employer (for contributions of \$200 or more	
	NIA				
Line 9:	Total receipts in excess of \$50 (or listed above)	Ø			
	Total receipts \$50 and under* (not listed above)	Ø			
	TOTAL RECEIPTS IN THE PERIOD	0		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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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	
ulilu	BANNSTHYBLE FILOTVERPH SIE	MAIN ST HYANNIG	WKWSPAPRR AD	168	75
alilu	BARNSTABLE PATRIOT	MAIN ST MYANNIS	NEWSPHARN AD	112	-
11/11/11	CH PR COD TIMES	MAIN ST HYANNIS	NEWS PAPVER AD	260	13
11/2/11	STAPRS	ALAWSIABLE RD LEYANNIS	PRINTING AND SUPPLIVES	75	42
		Line 12:	Expenditures over \$50	616	30
Line 13: Expenditures \$50 and un				45	79
F	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	662	09

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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