

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 04/01	Inding Date: 10/35/14				
Type of Report: (Check one)  ☐ 8th day preceding preliminary  8th day preceding election	30 day after election  year-end report dissolution				
Gordon M Starv  Candidate Full Name (if applicable)  Town Councilor Precinct 1  Office Sought and District  85 Pilots Way, W. Barnstable MA  Residential Address  E-mail: Gordon.m. Starr & gmail. Com  Phone # (optional): 774 368 0923	Gordon Staw for Town Councilor  Committee Name  Sherry F Greene-Starr  Name of Committee Treasurer  85 Pilots Way, W. Barnstable MA  Committee Mailing Address  E-mail: 4staw 3620 msn. Carn  Phone # (optional): 774 368 0936				
SUMMARY BALANCE	E INFORMATION:				
Line 1: Ending Balance from previous report	<del>-</del>				
Line 2: Total receipts this period (page 3, line 11)	5395.00				
Line 3: Subtotal (line 1 plus line 2)	\$345.00 B				
Line 4: Total expenditures this period (page 5, line	14) 2022.67				
Line 5: Ending Balance (line 3 minus line 4)	3372.33				
Line 6: Total in-kind contributions this period (pag	e6) 1590.00 <sup>3</sup>				
Line 7: Total (all) outstanding liabilities (page 7)	8				
Line 8: Name of bank(s) used: The Cooperative Bank of Cape Cod					
Affidavir of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in activity of all persons acting under the authority of Candidate: (check I box  Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the beactivity, of all persons acting under the authority or on behalf of this committee in acconfineurred any liabilities nor made any expenditures on my behalf during this reporting persons acting under the authority of this committee in acconfineurred any liabilities nor made any expenditures on my behalf during this reporting persons acting under the authority of this committee in acconfineur activity, including contributions, loans, receipts, expenditures. disbursements, in the behalf of this committee.	est of my knowledge and belief, a true and complete statement of all campaign conduct with the requirements of M.G.L. c. 55.  Date: 10/25/19  Date: 10/25/19				
campaign finance activity of all persons acting under the authority or on behalf of this of	candidate in accordance with the requirements of M.G.L. c. 55.				
Signed under the penalties of perjury:	(Candidate's signature)				

#### **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	i	,
Bate Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/15/11	David + Rightforme Allen 2540 Main St. Barnstable, ma	\$250	Retwize
14/19	Robert + Eliz. Betti 721 11th St. Key Colony Beach, FL	\$500	Cape Cod Family Fishing Charters Owner
10/16/19	Robert Bucchianer'i 956 River Rd Marstons Mills, MA	\$100,~	
9/27/19	Grad Elovita 1860 Santvit Newtown Rd Cotvit MM	\$ 200.	Clinical Psychologist Limbic Resources
10/14/19	P.O. Box 132 Cummaquid, MA	\$500.	Retired
1/11/19	James L Karin Flynn 1315 Wenonga Rd Leawoul, Kt	4100~	
9/24/19	Waynerttyon Hayes 37 Anthony Dr Ny annis, MA	\$ 500,-	Shell fisherman Wayne Nayco Scafood
10/4/11	Les Hemmila 98 Governors Way Barnstable, m	\$ 200.	Oyster farmer Barnstable Scatarms
10/21/19	Robert + Beverly Parke St Deacon of Barnstable, ma	\$ 100.~	
10/9/19	Joyce + Ronald Persvitte 59 Colonial Wax W Bernstebb, MM	\$ 150,-	
14/5/19	Andrew Archik 68 Pilots Wax W Barnstable	\$ 150-	
9/27/19	Christopher Shand & Tim John son 243 Spring St Apt 2 New Port, RI	\$ 100.	
ine 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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**

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)
9/8/19	Frederick Schlipp IS Elm Croft Way Yarmantaput Mil	\$ 300.	Retired
10/23/19	Chloe Starr 1000 Main St Unit 14 West Barnstade M	\$100,-	
10/5/14	Gary Stem 782 Waybridge Rd Waybridge Ur	\$ 100.	
9/18/19	Govdon Starr 86 Phts Way W Barnstable, MM	1000	Luan to campaign Retired teacher
10/4/11	Susan Jo Truitt 203 Parkur Rd Osterville, MM	\$ 500	Retired
Line 9: Total Rece	ipts over \$50 (or listed above)	4850.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)	545.00	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	5395.00	page 1, line 2

<sup>\*</sup> 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

eport all expend	ditures. Please include your comm  To Whom Paid	nittee name and a page number or	n each page.)	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
9/14/19	Lit Campaigns	9 PincNurst Ave Matta poisett, MA	Palm card design a consulting	\$400.00
4/27/14	harry Mulaire	2514 Main St. WBarnstable, MA	Reimbursement 6 magnetic signs	\$125.75
9/27/19	Larry Muláric	2514 Main St. W Barnstably MM	Reimbursement 50 Sign Wickets	\$ 63.35
10/8/19	Larry Mwarre	2514 Main St. W Barnstable MA	Rembursement yard signs 485.00 Wickets 82.38	\$542.38
9/29/19	Chloc Starr	W Barnstabk MA	Remonsement Palm Cards	\$191.61
10/23/11	Sunderland Printing	lls Enterprise Rd Nyannis, MA	Postands for mailing event	\$159.38
10/23/19	Trades Joes	tyannis, ma	food + beverage for campaign work event	\$ 44. 93
10/23/1	USPS	1145 Main St. Wood Bannstable, MA	postcard stamps	\$210.08
9/24/19	Tess Wood	397 Hulls Fall Rd Keenes NY	graphics design for signs	\$100.00
		Line 12: Total Expenditures ov	er \$50 (or listed above)	1837.40
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	185.27
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	2022.67

<sup>\*</sup> if you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

### 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
10/4/19	Avery Revere dlaa Stardog Design	P.O. Box 321 Bornstable, MA	Web design, domain registration, hosting posts y search engine	\$ 1590.00
			Optimization	
	L	Line 15: In-Kind Contribution	ons over \$50 (or listed above)	1590.00
		Line 16: In-Kind Contribution	ns \$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	1590.00

<sup>\*</sup> 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.

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## 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
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Territorian				
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Management of the state of the	the second secon		1	
La constanta de la constanta d				
About the state of				
77-11-11-11-11-11-11-11-11-11-11-11-11-1				
Acces 100 100 100 100 100 100 100 100 100 10				
				The state of the s
JL				