

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

DARNSTABLE TOWN CLERK

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	2019 Ending Date: 12/31/2019
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐	30 day after election vear-end report dissolution
- paula outilistable)	Schneap Committee Committee Name Robert Buccheaneri Name of Committee Treasurer 952 Perer Road Warstras WilseMA Committee Mailing Address E-mail: Daula barnstable ag mail.com Phone # (optional):
CYYLENADY DAY ANCE	INFORMATIONI
SUMMARY BALANCE	INFURMATION:
Line 1: Ending Balance from previous report	#1,347.04
Line 2: Total receipts this period (page 3, line 11)	0. 00
Line 3: Subtotal (line 1 plus line 2)	41,347,64
Line 4: Total expenditures this period (page 5, line 1	4) 0.00
Line 5: Ending Balance (line 3 minus line 4)	* 1,347,04
Line 6: Total in-kind contributions this period (page	6) 0.00
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used:	
Affidavit 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 acc Signed under the penalties of perjury:	tributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of	nly)
Candidate with Committee Certify that I have examined this report including attached schedules and it is, to the best activity, of all persons acting under the authority or on behalf of this committee in according incurred any liabilities nor made any expenditures on my behalf during this reporting personal control of the committee.	dance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee I certify that I have examined this report including attaches schedules and it is, to the best finance activity, including contributions, loans, receipts expenditures, disbursements, in campaign finance activity of all persons acting under the authority or on behalf of this can Signed under the penaltics of perjury:	-kind contributions and liabilities for this reporting period and represents the

This balance reflects current amount in Campaign checking account. It does not reflect previous loans (via credit card) that candidate made to the Campaign. Per instructions from the Office of Campaign and Political Finance on January 21, 2020, candidate should file this report as presented and then complete and submit revised OCPF reports for the periods ending 9.1.2017, 10.25.2017, 12.31.2017 and 12.31.2018, 12.31.2019 within the next few months.

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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.)

	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical fisting required)	TAMOUNT	
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		1	
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4-34-4			
		<u> </u>	
		<u> </u>	
ine 9: Total Rec	eipts over \$50 (or listed above)		
Line 10: Total Rec	ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
ine 11: TOTAL	ed receipts of \$50 and under, include them in l		

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(arphabetean insurging age)		

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	1		
	The state of the s		
		<u> </u>	
Line 9: Total Rec	ceipts over \$50 (or listed above)		_
	eceipts \$50 and under* (not listed above)		
Line 11. TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
IMICAL, ACEAN	2000 1 1 in hide them in	line 0. Line 10 sho	buld 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 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
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			A Laboratoria de la Carta de l	
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		Line 12: Total Expenditur	res over \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above)		
		TA- 14 TOTAL EVDE	NDITURES IN THE PERIOD	

^{*} 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Laid	(mbinostom man)			
				<u> </u>
l				
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50 a	nd under* (not listed above)	
	D. C. Comman 1 Book A	Line 14: TOTAL EXPENT	DITURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not it 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contribution	ons over \$50 (or listed above)	
		Line 16: In-Kind Contribution	ns \$50 & under (not listed above)
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS a calendar year, you must report the	1 11

^{*} 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.

Page 6

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.

ate Incurred	To Whom Due	Address	Purpose	Amount
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				11 TO THE REAL PROPERTY OF THE PROPERTY OF THE REAL PROPERTY OF THE REAL PROPERTY OF THE PROP
		1 -		
	Enter on wage 1 line 7 -	Line 18: TOTAL OUTSTA	ANDING LIABILITIES (AI	L)