



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BARNSTABLE
TOWN CLERK

Commonwealth
of Massachusetts

13 OCT 28 P3:31

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
	8	1	2013		10	28	2013

Type of report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

ERIC R. STEINHILBER
Full Name of Candidate (if applicable)

TOWN COUNCIL - PCT 2
Office Sought and District

399 BISHOPS TER HYANNIS, MA 02601
Residential Address

Tel. No. (optional)

STEINHILBER COMMITTEE
Committee Name

JENNIFER STEINHILBER
Name of Committee Treasurer

PO BOX 974
Committee Mailing Address

BARNSTABLE, MA 02630
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>104.69</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>3035.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>3139.69</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>2255.52</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>884.17</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>TD BANK</u>

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:

[Signature] _____ 10/28/13
Treasurer's signature (in ink) 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:

Candidate signature (in ink) 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)
8/12/13	BOB DWYER 174 SALT ROCK RD BARNSTABLE 02630	200	PRESIDENT, NAT. HISTORY MUSEUM
8/15/13	JENNIFER NASSOUR 340 MARLBOROUGH BOSTON, MA 02115	150	
8/21/13	CHRIS EGAN 116 PLANDERS RD WESTBOROUGH, MA 01581	500	MANAGER, CAREYOUTH
8/30/13	GREG LISCIOTTI 83 ORCHARD Hill PK LUDLOW, MA 01453	500	PRESIDENT, LISCIOTT DEVELOPMENT
9/19/13	PETER CRISTMAN PO BOX 1147 BARNSTABLE 02630	100	
9/19/13	DAVID NEAL 2 SEVECA RD SANDWICH, MA	50	
9/19/13	RUTH ANN CAREY 986 SEA VIEW AVE OSTERVILLE 02655	100	
9/19/13	JEFFREY WARBIN 40 CAPTAIN LORENT BARNSTABLE 02630	50	
9/19/13	JOHN COOKSON 85 WATSONS CREEK MAYFLOWERS MILLS 02648	50	
9/19/13	ADAM CHAPMAN 1060 PALMUM RD WYANUS, 02601	50	
10/15/13	ERIC STEINWILBERG 399 BISHOPS TOW WYANUS 02601	500	CANDIDATE
10/21/13	BRIAN SIMONSCHEVE 204 CRYSTAL LAKE OSTERVILLE 02655	500	PARTNER, GENERAL CATALYST
10/21/13	MARY ALLEN BRADLEY 4 CTRAS WAY ORLEANS 02653	100	
10/23/13	DONOVAN HUGHES 312 PLEASANT PINES CENTERVILLE 02632	100	
Line 9: Total receipts in excess of \$50 (or listed above)		2950	
Line 10: Total receipts \$50 and under* (not listed above)		85	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3035	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.

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	
9/8/13	RTC ADVISORS	4 GALLAGHER DRIVE PLYMOUTH, MA 02360	CAMPAIN DATA CAMPAIN DATA	150	-
9/16/13	USPS	BARNSTABLE, MA 02630	POSTAGE	184	-
9/16/13	MINUTEMAN PRESS	1694 PALMOUTH RD CENTREVILLE 02632	PRINTING	310	58
9/20/13	ERIC STEINWILBERG	399 BISHOPS TOR HYANNIS, MA 02601	RECEPTION - REIMBURSEMENT	214	14
9/25/13	VICTORY STONE	5200 SW 30th ST DAVENPORT, FL 32802	SIGNS	578	40
10/10/13	USPS	CENTREVILLE, MA 02632	POSTAGE	92	-
10/15/13	MINUTEMAN PRESS	1694 PALMOUTH RD CENTREVILLE, 02632	PRINTING	310	58
10/22/13	USPS	CENTREVILLE, MA 02632	POSTAGE	92	-
10/24/13	MINUTEMAN PRESS	1694 PALMOUTH RD CENTREVILLE, 02632	PRINTING	185	94

Line 12: Expenditures over \$50	2117	64
Line 13: Expenditures \$50 and under*	137	88
Line 14: TOTAL EXPENDITURES	2255	52

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	

* 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)	