

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

BARNSTABLE TOWN CLERK

	File with: Cavor Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: 31Au				
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
Timothy J. FERREIRA	Committee to ELECTIM FORREIRA			
Candidate Full Name (if applicable)	Committee Name			
E A Maria 9	CHERYLR FREEMAN			
Office Sought and District	Name of Committee Treasurer			
	Name of Committee Treasurer			
80 QUAKER RD- HYADING MA	80 OWAKER RD, HYANAYS			
Residential Address	Committee Mailing Address			
Telephone Number (optional): 774-487-2520	Telephone Number (optional): 774-487-2500			
SUMMARY BALANCE	INFORMATION:			
Line 1: Ending Balance from previous report	4			
Line 1. Ending Balance from previous report	9			
Line 2: Total receipts this period (page 3, line 11)	930.22			
Line 3: Subtotal (line 1 plus line 2)	930-22			
Line 4: Total expenditures this period (page 5, line 1	4) 830,22			
Line 5: Ending Balance (line 3 minus line 4)	100,00			
Line 6: Total in-kind contributions this period (page	6) 🔀			
Line 7: Total (all) outstanding liabilities (page 7)	Ø			
Line 8: Name of bank(s) used: TD BANK				
Affidavit of Committee Treasurer:				
I certify that I have examined this report including attached schedules and it is, to the best of r				
activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind cont finance activity of all persons acting under the authority or on behalf of this contribute in accordance.				
Signed under the penalties of perjury:	(Treasurer's signature) Date: 2500			
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box or	aly)			
Gandidate with Committee and no activity independent of the 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 per	lance with the requirements of M.G.L. c. 55. I have not received any contributions,			
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's signature) Date: 250013			

SCHEDULE A: RECEIPTS (continued)

Selizotte M. Recell 15 (continued)				
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
09/30/13	Tim FERREIRO BO QUAKER RD HYANNS	115.81	CANDICIA TE (CONTRIBUTION)	
10/16/13	TIM FERREIROL' 80 QUAKERRO. HANN	598,60	CANDIDATE. CONTRIBUTION	
p11913	TIN FERREIRO. 80 QUAKERRA, HYADAYS	115.81	CANDIDATE CONTRIBUTION	
P/24/13	Tim FERREIRA BOQUAKER Rd. HyAN	100	CANDICAT CONTRIBUTION (BANK)	
Line 9: Total Rece	ipts over \$50 (or listed above)	930,22		
Line 10: Total Rece	cipts \$50 and under* (not listed above)			
Line 11: TOTAL	RECEIPTS IN THE PERIOD	930.22	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.

Tim Ferreira SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1416/13	Simple Signs BCAPE Cod	650 Rt. 28 W. YARMOUTHMA	LAWN SIGNS + STAKES	598.60
9/34/3	Staples	364 BARNS APKEL HYANNIS, MA	flyers #100	115.81
19/18/B	Staples	364 BARNSAREL RI HYANDIS MA	PRINT COLOR Flyers #100	(15.81
		Line 12: Expenditures over \$50 (or listed above)		
	Line 13: Expenditures \$50 and under* (not listed above)			
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			830. 22

^{*} 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			·	
		Line 15: In-Kind Contributions over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	5 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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.

Date Incurred	To Whom Due	Address	Purpose	Amount
				·
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				6

Page 7