



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

*[Signature]*  
ORLEANS TOWN CLERK

21 MAR 22 8:54AM

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/11/2021 Ending Date: 3/12/2021

Type of Report: (Check one)

8th day preceding preliminary     8th day preceding election     30 day after election     year-end report     dissolution

Candidate Full Name (if applicable): \_\_\_\_\_

Office Sought and District: \_\_\_\_\_

Residential Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone # (optional): \_\_\_\_\_

Nauset High School Renovation Support Committee  
Committee Name

Vanessa L. Greene  
Name of Committee Treasurer

76 Tracy Lane Brewster, MA 02631  
Committee Mailing Address

E-mail: vanessa.lynne.greene@gmail.com

Phone # (optional): 781-974-8557

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	5215.00
Line 3: Subtotal (line 1 plus line 2)	5215.00
Line 4: Total expenditures this period (page 5, line 14)	3924.42
Line 5: Ending Balance (line 3 minus line 4)	1290.58
Line 6: Total in-kind contributions this period (page 6)	1298.32
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used:	<u>Cape Cod 5</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: Vanessa L. Greene (Treasurer's signature) Date: 3/19/21

**FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)**

**Candidate with 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 that are not otherwise disclosed in this report.

**Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Candidate's signature) 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.*

**(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)
1/28/2021	Beebe, Jacqui 750 Schoolhouse Road Eastham, MA 02642	100.00	
1/23/2021	Boyce, Craig 128 Monument Road Orleans, MA 02653	250.00	Managing Partner / ALS Investment Fund
2/11/2021	Cole, Katie 12 Prides Path Orleans, MA 02653	250.00	Human Resources / Accenture
1/28/2021	Cormier, Adrienne 48 Quarter Master Drive Brewster, MA 02631	100.00	
1/22/2021	Easley, Chris 36 Kerouach Road Wellfleet, MA 02667	100.00	
1/19/2021	Fernandes, Abigail 22 Sheffield Road Brewster, MA 02631	100.00	
2/1/2021	Fitzgibbons, Tom 408 Yankee Drive Brewster, MA 02631	300.00	Retired / Retired
1/22/2021	Gaskill, Mary Jo 20 Cole Place Orleans, MA 02653	100.00	
1/29/2021	Gupta, Mita 60 Scarborough Road Brewster, MA 02631	100.00	
2/4/2021	Holleran, Nancy 11 Sheffield Road Brewster, MA 02631	250.00	Retired / Retired
2/24/2021	Loftus Levine, Mary 55 Spruce Run Drive Brewster, MA 02631	100.00	
3/8/2021	Moore, Anne 6 Quasons Path Brewster, MA 02631	55.00	
Line 9: Total Receipts over \$50 (or listed above)		[ ]	
Line 10: Total Receipts \$50 and under* (not listed above)		[ ]	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		[ ]	← 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.*

**(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
2/1/2021	Anne Moore	6 Quasons Path Brewster, MA 02631	Reimbursement for Postcard Printing	167.86
2/17/2021	Anne Moore	6 Quasons Path Brewster, MA 02631	Reimbursement for Postcard Postage	432.00
3/1/2021	Anne Moore	6 Quasons Path Brewster, MA 02631	Reimbursement for Postcard Postage	180.00
3/9/2021	Casey Mecca	32 Woodward Road Brewster, MA 02631	Reimbursement for T-shirts	340.69
3/9/2021	Community News Advertisement	5 Namskaket Road Orleans, MA 02653	Cape Codder Print Advertisement	873.00
2/3/2021	Christine Peterson	67 Quasons Path Brewster, MA 02631	Reimbursement for Sign Printing	1196.15
2/12/2021	Garran Peterson	67 Quasons Path Brewster, MA 02631	Reimbursement for Sign Stands	95.61
3/4/2021	Online Sign Order Build A Sign LLC	11525 Stonehollow Dr Ste A100 Austin, TX 78758-3269	Sign Printing	398.44
Various	Raise The Money	P.O. Box 26466 Little Rock, AR 72221	Processing Fee for Online Contributions	240.67
Line 12: Total Expenditures over \$50 (or listed above)				3924.42
Line 13: Total Expenditures \$50 and under* (not listed above)				0
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>3924.42</b>

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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
1/20/2021	Vanessa Greene	76 Tracy Lane Brewster, MA 02631	Post Office Box Rental	28.00
3/4/2021	Vanessa Greene	76 Tracy Lane Brewster, MA 02631	Thank You Notes	22.44
3/15/2021	Vanessa Greene	76 Tracy Lane Brewster, MA 02631	Envelopes	15.88
3/8/2021	Vanessa Greene	76 Tracy Lane Brewster, MA 02631	Stamps	44.00
2/1/2021	Anne Moore	6 Quasons Path Brewster, MA 02631	Stamps	97.20
Line 15: In-Kind Contributions over \$50 (or listed above)				207.52
Line 16: In-Kind Contributions \$50 & under (not listed above)				1090.80
Enter on page 1, line 6 → <b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				<b>1298.32</b>

\* 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.

