



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

'16 MAY 9 8:54AM

ORLEANS TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:	Beginning Date: <u>3/23/16</u>	Ending Date: <u>4/29/16</u>
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Type of Report: (Check one)

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

Alan McClennen
Candidate Full Name (if applicable)

Selectman, Town of Orleans
Office Sought and District

157 Namequoit Road, Orleans, MA 02653
Residential Address

E-mail: alanboats@aol.com

Phone # (optional): _____

Committee to Re-Elect Alan McClennen
Committee Name

Per John Ostman
Name of Committee Treasurer

PO Box 1973, Orleans, MA 02653
Committee Mailing Address

E-mail: pjocape@comcast.net

Phone # (optional): 508-280-8980

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	\$6,090.00
Line 3: Subtotal (line 1 plus line 2)	\$6,090.00
Line 4: Total expenditures this period (page 5, line 14)	\$5,537.57
Line 5: Ending Balance (line 3 minus line 4)	\$552.43
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Cape Cod Five Cents Savings Bank

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 of or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 5/6/16

FOR CANDIDATE FILINGS ONLY: 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: [Signature] (Candidate's signature) Date: 5/6/16

CONTRIBUTOR REPORT

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)
	See Attached detail Sheet		
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$6,090.00	← 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.

		FORM-CPE-M-102 CAMPAIGN FINANCE REPORT MUNICIPAL FORM			
DATE RECEIVED	LAST NAME	NAME	ADDRESS	Town, State, Zip	AMOUNT
4/28/16	Ames	Jane	15 Ridgewood Road, PO Box 64	South Orleans, MA 02662	\$50.00
4/26/16	Athanassiou	Jeanne	PO Box 882	East Orleans, MA 02643	\$200.00
4/28/16	Barker	Robert	PO Box 354	East Orleans, MA 02643	\$25.00
4/26/16	Barron	Scott	PO Box 1860	Orleans, MA 02653	\$100.00
4/26/16	Bechtold	Chip	PO Box 1997	Orleans, MA 02653	\$100.00
4/7/16	Corlette	Jane	49 Chestnut Drive	Orleans, MA 02653	\$100.00
4/26/16	Condon	Thomas	22 Captains Row, PO Box 2541	South Orleans, MA 02662	\$50.00
4/26/16	Crabtree	Janet	PO Box 858	Orleans, MA 02653	\$50.00
4/26/16	Curran	Mary Jane	71 Great Oak Road	East Orleans, MA 02643	\$50.00
4/28/16	DeLima	Elizabeth	11 Uncle Harvey's Way, PO Box 1524	East Orleans, MA 02643	\$50.00
4/26/16	Dorman	Gerald	PO Box 1332	Orleans, MA 02653	\$25.00
4/20/16	Dowd	Carolyn	175 Tonset Road	Orleans, MA 02653	\$20.00
4/26/16	Eidredge	Mary	PO Box 97	South Orleans, MA 02662	\$100.00
4/26/16	Fallender	Patricia	190 Barley Neck Road	Orleans, MA 02653	\$25.00
4/26/16	Flanigan	Elaine	20 Nauset Farms Way, PO Box 1046	East Orleans, MA 02643	\$25.00
4/26/16	Finan	Thomas	141 Dorchester Ave. Unit 515	South Boston, MA 02127	\$200.00
4/20/16	Furst	Gary	22 Great Oak Road	Orleans, MA 02653	\$25.00
4/28/16	Galligan	Kevin	148 Great Oak Road	Orleans, MA 02653	\$25.00
4/28/16	Halter	Brenda	5 Maple Road, PO Box 1298	East Orleans, MA 02643	\$25.00
4/28/16	Heritage	Kenneth	12 Freeman Lane	Orleans, MA 02653	\$30.00
4/26/16	Hidden	Mary	PO Box 858	Orleans, MA 02653	\$100.00
4/28/16	Holt	Barbara	18 West Road, Apt. 211	Orleans, MA 02653	\$100.00
4/28/16	Hubbard	Robin	41 Defiance Lane, PO Box 2248	Orleans, MA 02653	\$50.00
4/26/16	Jackson	Allison	6 Mill Race	Orleans, MA 02653	\$50.00
4/26/16	Jacob	Sally	PO Box 385	South Orleans, MA 02662	\$100.00
4/26/16	Keeley	Joanna	79 South Orleans Road	Orleans, MA 02653	\$100.00
4/26/16	Klimshuk	Dorofei	PO Box 474	South Orleans, MA 02662	\$50.00
4/26/16	Kelsey	John	PO Box 898	East Orleans, MA 02643	\$50.00
4/26/16	Kennedy	Carolyn	96 Tonset Road	Orleans, MA 02653	\$75.00
4/26/16	Kennedy	Marion	96 Tonset Road	Orleans, MA 02653	\$25.00
4/20/16	Lyons	Charles	16 Emmans Way	Methuen, MA 01844	\$200.00
4/26/16	McCauley	James	19 Colony Drive	Orleans, MA 02653	\$50.00
3/23/16	McClennen	Alan	157 Namequoit Road	Orleans, MA 02653	\$500.00
3/23/16	McClennen	Fran	157 Namequoit Road	Orleans, MA 02653	\$500.00
4/28/16	McClennen	Walter	432 Fiske Street	Holliston, MA 01746	\$60.00
4/28/16	McKusick	Kenneth	48 Namequoit Road, PO Box 548	South Orleans, MA 02662	\$75.00
4/26/16	Mead	Phyllis	PO Box 1413	East Orleans, MA 02643	\$50.00
4/26/16	Merritt	Elizabeth	64 Nickerson Road	Orleans, MA 02653	\$50.00
4/26/16	Mewharter	Anita	33 West Road, Unit 4A	Orleans, MA 02653	\$40.00
4/7/16	Meyer	John	11 Blue Rock Road, P.O. Box 1005	East Orleans, MA 02643	\$500.00
4/28/16	Miller	Hannelore	11 Blue Rock Road, P.O. Box 1005	East Orleans, MA 02643	\$500.00
4/26/16	Minear	Richard	PO Box 26	South Orleans, MA 02662	\$35.00
4/28/16	Minkoff	Larry	PO Box 2165	Orleans, MA 02653	\$50.00
4/26/16	Natalie	Maxine	66 Winslow Drive	Orleans, MA 02653	\$25.00
4/26/16	Nelson	John	11 Pleasant View Drive, PO Box 1467	East Orleans, MA 02643	\$50.00
4/26/16	Parra	Kingsley	14 Nauset Rd., PO Box 1137	East Orleans, MA 02643	\$100.00
4/26/16	Parra	Erica	Barley Neck Road, PO Box 672	East Orleans, MA 02643	\$50.00

		FORM-CPE M-102 CAMPAIGN FINANCE REPORT MUNICIPAL FORM									
DATE RECEIVED	LAST NAME	NAME	ADDRESS	Town, State, Zip	AMOUNT	OCCUPATION & EMPLOYER > \$200					
4/7/16	Peters	Michael	Jack Knife Point, P.O. Box 874	East Orleans, MA 02643	\$50.00						
4/26/16	Pfluger	Adrienne	20 Briar Spring Road	Orleans, MA 02653	\$25.00						
4/20/16	Phillips	Betty & Steve	P.O. Box 745	East Orleans, MA 02643	\$25.00						
4/26/16	Phillips	Karen	PO Box 1337	Orleans, MA 02653	\$75.00						
4/26/16	Reed	Joan	18 West Road, Apt. 312	Orleans, MA 02653	\$25.00						
4/26/16	Reed	Judith	18 West Road, Unit 307	Orleans, MA 02653	\$40.00						
4/20/16	Renn	Robert	P.O. Box 54	East Orleans, MA 02643	\$100.00						
4/26/16	Rilling	Allison	8 Colonial Drive	Orleans, MA 02653	\$25.00						
4/28/16	Roy	Jeffery	8 Nickerson Road	Orleans, MA 02653	\$25.00						
4/26/16	Runyon	Melford	51 Portanimitic Road	Orleans, MA 02653	\$50.00						
4/20/16	Schneider	Jan	46 Thayer Lane, P.O. Box 1044	South Orleans, MA 02662	\$100.00						
4/28/16	Shactman	David	21 Forest Way, PO Box 659	South Orleans, MA 02662	\$150.00						
4/28/16	Smith	Linda	24 Old Colony Way, Unit 5	Orleans, MA 02653	\$10.00						
4/26/16	Snow	Sidney	200 Tonset Road	Orleans, MA 02653	\$100.00						
4/26/16	Taylor	Janet	PO Box 97	East Orleans, MA 02643	\$50.00						
4/26/16	Twiss	Robert	56 Lake Dr, PO Box 631	South Orleans, MA 02662	\$20.00						
4/26/16	Ward	Richard	11 Duck Marsh Lane	Orleans, MA 02653	\$25.00						
4/26/16	Whitneyterry	Judith	346 Tonset Road	Orleans, MA 02653	\$30.00						
3/23/16	Wilkinson	Robert	20 Pershing Lane	Orleans, MA 02653	\$50.00						
4/26/16	Utt	Mary Hunter	10 Captain Linnell Road	Orleans, MA 02653	\$50.00						
					\$6,090.00						
DATE RECEIVED	LAST NAME	NAME	ADDRESS	Town, State, Zip	AMOUNT	OCCUPATION & EMPLOYER > \$200					
4/26/16	Athanassiou	Jeanne	PO Box 882	East Orleans, MA 02643	\$200.00	Retired					
4/7/16	Furst	Gary	141 Dorchester Ave. Unit 515	South Boston, MA 02127	\$200.00	Principal at Generational Equity Partners					
4/20/16	Galligan	Kevin	22 Great Oak Road	Orleans, MA 02653	\$200.00	Consultant, Self Employed					
4/20/16	Lyons	Charles	16 Emmons Way	Methuen, MA 01844	\$200.00	Retired					
3/23/16	McClennen	Alan	157 Namequoit Road	Orleans, MA 02653	\$500.00	Consultant, Self Employed, Candidate					
3/23/16	McClennen	Fran	157 Namequoit Road	Orleans, MA 02653	\$500.00	Retired					
4/7/16	Meyer	John	11 Blue Rock Road, P.O. Box 1005	East Orleans, MA 02643	\$500.00	Retired					
4/7/16	Meyer	Hannelore	11 Blue Rock Road, P.O. Box 1005	East Orleans, MA 02643	\$500.00	Retired					

SCHEDULE A: RECEIPTS (continued)

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

Line 9: Total Receipts over \$50 (or listed above)	
Line 10: Total Receipts \$50 and under* (not listed above)	
Line 11: TOTAL RECEIPTS IN THE PERIOD	

← 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.

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
	See Attached Detail Sheet			
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$5,537.57

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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				

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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)	
Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

Enter on page 1, line 6 →

* 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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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)	0