

Form CPF M 102: Campaign Finance Report Municipal Form

16 MAY 9 11:28AM

Office of Campaign and Political Finance



Commonwealth of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3/18/16 Ending Date: 4/29/16

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

Mark William Mathison
 Candidate Full Name (if applicable)
Orleans selectman
 Office Sought and District
20 Tanglewood Terrace, E. Orleans
 Residential Address 02643
 E-mail: mathmp@verizon.net
 Phone # (optional): _____

The Committee to Elect Mark Mathison
 Committee Name
Alexis Mathison
 Name of Committee Treasurer
P.O. Box 278 Orleans, MA 02653
 Committee Mailing Address
 E-mail: alexis.mathison@gmail.com
 Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$3075</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$3075</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$300</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$2775</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$0</u>
Line 8: Name of bank(s) used:	<u>CAPE COD FIVE</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: Alexis Mathison (Treasurer's signature) Date: 05/08/16

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: Mark Mathison (Candidate's signature) Date: 5/8/16

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)
4/17/16	Joan W Barnes P.O. Box 1882, 02653	100	
4/16/16	Katharine Blakeley P.O. Box 1923, 02653	100	
4/11/16	Mary Allen Bradley 4 Effas Way, 02653	250	Retired
3/20/16	Marilyn M. Bvneau	150	
4/22/16	Gary W. Bussell 450 W. 17 th Street #931, 10011	100	
4/11/16	Anne H. Carron P.O. Box 213, 02662	100	
4/11/16	Mark E. Carron P.O. Box 213, 02662	150	
3/18/16	Edward J. Daly P.O. Box 816, 02643	150	
3/18/16	Dr. Elizabeth A. Daly P.O. Box 816, 02643	150	
4/17/16	Stephen G. Daly 96 Mansfield Rd, 01845	150	
3/20/16	David M. Dunford P.O. Box 774, 02662	150	
4/11/16	David M. Dunford P.O. Box 774, 02662	200	Banker
Line 9: Total Receipts over \$50 (or listed above)	1750		
Line 10: Total Receipts \$50 and under* (not listed above)	225		
Line 11: TOTAL RECEIPTS IN THE PERIOD	1975	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/4/16	Michael C. Farber 15 Salty Ridge Rd, 02653	100	
4/27/16	Bernadette Heaney 75 Captain Curtis Way 02653	100	
4/15/16	Michael C. Houghton P.O. Box 75, 02642	200	Retired
4/17/16	Brian T. Kavanaugh 100 Freeman Lane, 02653	100	
4/17/16	Peter O'Meara 4 Little Marsh Lane 02662	100	
4/13/16	E. Douglas Plucienik 49 Chickadee Lane 02653	100	
3/28/16	Gordon A. Smith 3 Ruggles Rd, 02653	100	
3/25/16	Todd B. Thayer 82 Arey's Lane, 02653	100	
4/4/16	James F. Trainor P.O. Box 1848, 02653	200	Real Estate Agent
Line 9: Total Receipts over \$50 (or listed above)		1100	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1100	← 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
4/27/16	Darren Wotherspoon Design	44 CYPRES STREET WELLFLEET, MA 02167	Campaign Flyers	300
Line 12: Total Expenditures over \$50 (or listed above)				300
Line 13: Total Expenditures \$50 and under* (not listed above)				/
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				300

* 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
			Line 12: Expenditures over \$50 (or listed above)	/
			Line 13: Expenditures \$50 and under* (not listed above)	/
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	300

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.

