

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

OT ANIASSACITASOLO	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 3-6	25-2015 Ending Date: 5-11-2015
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Robelt Wheeler	
Candidate Full Name (if applicable)	Committee Name
Board of Health	
Office Sought and District	Name of Committee Treasurer
32 West St. Berlin MA 01503	
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
reseptione (vuinoei (optional).	Telephone (value).
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	328.64
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line	14)
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (pag	e 6)
Line 7: Total (all) outstanding liabilities (page 7)	•
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in ac	ntributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of	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 be 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 personal control of the committee in according to the committee of the committee in according to the committee of the c	rdance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing sepa I certify that I have examined this report including attached schedules and it is, to the be finance activity, including contributions, loans, receipts, expenditures, disbursements, ir campaign finance activity of all persons acting under the authority or on behalf of the authority or on the authority or o	est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 5-20-15

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)
Date Received	(aiphabetical listing required)	Amount	(for contributions of \$200 or more)
			1
	#50 (1' (1 ') \	~	
ne 9: Total Receipt	s over \$50 (or listed above)		
ne 10: Total Receip	ts \$50 and under* (not listed above)	0	
ne 11: TOTAL RE	CEIPTS IN THE PERIOD	8	← 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 an expend	To Whom Paid	mittee name and a page number of	r each page.)	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3-25-15		Internet	Signs, Banners Business cards	228.64
	·			
				The room of the ro
— — — — — <u>— </u> [·		Line 12: Total Expenditures ove	er \$50 (or listed above)	#228.64
		Line 13: Total Expenditures \$50		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	228.64

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

Staples.com

All Copy & Print

Track Order

SEARCH

Q

WELCOME, Beverly (Logout)

My Saved Projects

copy&print

Order Details

Order Date: 3/25/2015 11:58 AM
Order Number: 0WNLF-93A29-6N2
Retail Order Number: 6827518955

Payment Type:

Staples

Order Status:

Ship To: Beverly A Wheeler 32 West Street Berlin, MA 01503 United States of America Phone: 5088736075

Bill To: Beverly A Wheeler 32 West Street Berlin, MA 01503 United States of America Phone: 5088736075

Order Status:	Processing	bevwheel	er@verizon.net bevwheele	er@verizon.net		
Status İnforma	ntion	Delivered Products		Quantity	Price	Subtota
Item Status: Shipped 3/30/20		BOB WHEELER	RE ELECT	2	\$16.99	
Carrier: UPS Gr Tracking #: 1Z7R44E203540		RDAIDS OF WEATH	Outdoor/Indoor (15-oz. vinyl)		\$18.96	\$35.95*
Item Status: Shipped 3/30/20 Carrier: UPS Gr	ļ	Lote	BOB WHEELER	20	\$108.49	NATION OF THE PROPERTY OF THE
Tracking #: 1Z7R44E203540	35370	BOB WHEELER BOARD OF HEALTH	Blank Backsides		INCLUDED	\$108.49
Item Status: Shipped 3/30/20 Carrier: UPS Gre		re elect WHEELER	RE ELECT	4	\$30.99	- Commence of Control
Tracking #: 1Z7R44E203540	35370	BOARD OF HEALTH	Blank Backsides		INCLUDED	\$30.99*
			BOB WHEELER	2	\$18.86	And spine of the control of the cont
Item Status: Shipped 3/30/20 Carrier: UPS Gro Tracking #: 1Z7R44E203540	ound	VOTER	White Fabric Color	2		
	1		X Large	2	INCLUDED	\$18.86
Item Status: Shipped 3/30/20	15					
Carrier: UPS Gro Tracking #: 1Z7R44E203540	1		Lawn Sign Stands	4	\$12.00	\$12.00*
Item Status: Shipped 3/30/20	15	VOTE	RE-ELECT	500	\$10.00	
Carrier: UPS Gro Tracking #: 1Z7R44E2035403	1	RESELECT BOB WHEELER A substitution for all fits	Blank Back Side 		INCLUDED	
and the same and t	.,	se subject the state of the control of the con	Matte		INCLUDED	\$10.00*
, , , , , , , , , , , , , , , , , , , ,				Original P		You Pay
		والمستوانية	Product Total:	\$647	'.90	\$216.29
		Shipping & Processing (Prior				FREE
			Ectimated Sales Tave		1	\$12.35