

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Now	8, 2023 Ending Date: Dec 8, 2023
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Gordon M Starr Candidate Full Name (if applicable) Town Cornellor Precinct 1	Gordon Star for Town Councilor Committee Name Sherry Greene- Starr Name of Committee Treasurer
85 Pilots Way W Barn Stable MA Residential Address	Name of Committee Treasurer 85 Pilots Way W Barnstade MA Committee Mailing Address
E-mail: Gordon. m. Start A gmail. com	E-mail: Astar 362 a msn. com
Phone # (optional):	Phone # (optional):
	CD INFORMATION
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	1628.00
Line 2: Total receipts this period (page 3, line 11	650.00
Line 3: Subtotal (line 1 plus line 2)	2278.00
Line 4: Total expenditures this period (page 5, lin	ne 14) 1388.54
Line 5: Ending Balance (line 3 minus line 4)	889.46
Line 6: Total in-kind contributions this period (p	age 6) 77.84
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Copperative	Bank of Cape Cod
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on the half of this committee in Signed under the penaltics of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	ox only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting	he best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirement of M.G.L. c. 55. I have not received any contributions, ag 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 finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the arthority or on behalf of the	ts, in-kind contributions an Liabilities for this reporting period and represents the
	Date:

(Caldidate's signature)

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)
11/5	Mary Monan 130 Sturbridge DU Oscavilk MA	\$ 100.	Retired
11/2	Barnstable Democratic Comm- Nyannos port MA	\$ 400	NA
11/1	Not Lobstan Inc 2641 Main St Barnstabk MA	\$ 150 ·	
Line 9: Total Rece	ipts over \$50 (or listed above)	650.00	
Line 10: Total Reco	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	650.00	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.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alp\ abetical order, all expenditures over \\$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, \text{tut 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.)					
Data Daid	To Whom Paid	Address	Purpose of Expenditure	Amount	
Date Paid	(alphabetical listing) Gordon Starr	85 Piloto Way W Barnstable MA	reimbinisement for 618 posterids + postage	\$ 379.89	
11/3/23	Sundayland Printing	115 Enterprise Rd Nyannis MA	Postcands 400 Palm cands	\$185.94	
11/9/23	Sherry Greene Stear	85 Pilots Wax WBarnstabk MA	resmbosse campaign X210x/Vote Today	× 36.75	
11/8/23	Cape God Beer	1336 Phoneys Lane Nyannis, MA	Campaign event	\$ 273.50	
11/4/23	Sherry Greena Starr	88 Pilots Way WBarnstable, MM	per campaign event	\$156.21	
11 (15/23	Avery Rever	P.D. Box 21 Bunstable, MA	Website	1356.25	
			print of Additional Control of the C		
			±		
Line 12: Total Expenditures over \$50 (or listed above)		1388.54			
Line 13: Total Expenditures \$50 and under* (not listed above)			1		
Enter on page 1, line 4 Line 14: TOTAL EXPENDITURES IN THE PERIOD				1388.54	

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

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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
11/8/23	ELM Action Fund	15 Court Sq. Suite 1000 Boston, MA	General staff	\$77.84
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 → 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.

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