Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning 02 17 2016 Ending 04 25 2016

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

Vincent G. Breglia
Full Name of Candidate (if applicable)
Selectman, Provincetown
Office Sought and District
18 Pleasant St., Provincetown

Vincent Breglia for Selectman
Committee Name
Mitchell Baker
Name of Committee Treasurer
PO Box 1627
Provincetown, MA 02657

Residential Address

Tel. No. (optional)

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:
Line 1: Ending balance from previous report $0
Line 2: Total receipts this period (page 2, line 11) $1,000.00
Line 3: Subtotal (line 1 plus line 2) $1,000.00
Line 4: Total expenditures this period (page 3, line 14) $979.96
Line 5: Ending balance (line 3 minus line 4) $230.04
Line 6: Total in-kind contributions this period (page 4) $0
Line 7: Total (all) outstanding liabilities (page 4) $0
Line 8: Name of bank(s) used Seamen’s Bank Commercial St., Provincetown

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:

Mitchell Baker
Treasurer's signature (in ink) 4.25.16

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)
☐ Candidate with Committee and no activity independent of the committee
☐ 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 of or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Candidate signature (in ink) 4.25.16
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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Name and Residential Address (alphabetical listing required)</th>
<th>Amount</th>
<th>Occupation &amp; Employer (for contributions of $200 or more)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/15/16</td>
<td>CYNTHIA B. GREP, P.O. BOX 1401, PROVINCETOWN MA 02657</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>4/25/16</td>
<td>VINCENT BOISSON, FOR SELECTION</td>
<td>950</td>
<td>LOAN</td>
</tr>
</tbody>
</table>

Line 9: Total receipts in excess of $50 (or listed above)

Line 10: Total receipts $50 and under* (not listed above) 25

Line 11: TOTAL RECEIPTS IN THE PERIOD 1000

* 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

<table>
<thead>
<tr>
<th>Date Paid</th>
<th>To Whom Paid (alphabetical listing)</th>
<th>Address</th>
<th>Purpose of Expenditure</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/25</td>
<td>Vincent Bregia</td>
<td>18 Pleasant St</td>
<td>R1 Reimbursement</td>
<td>979 96</td>
</tr>
</tbody>
</table>

Enter on page 1, line 4

- Line 12: Expenditures over $50: 979 96
- Line 13: Expenditures $50 and under*: -
- Line 14: TOTAL EXPENDITURES: 979 96

*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.

<table>
<thead>
<tr>
<th>Date Received</th>
<th>From Whom Received*</th>
<th>Residential Address</th>
<th>Description of Contribution</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NONE</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter on page 1, line 6

- Line 15: In-kind over $50
- Line 16: In-kind $50 and under
- Line 17: Total In-kind

* 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.

SCHEDULE D: LIABILITIES

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.

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>To Whom Due</th>
<th>Address</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/15</td>
<td>Vincent Fregia</td>
<td>189 Race St, Pawtucket</td>
<td>Loan</td>
<td>$50</td>
</tr>
</tbody>
</table>

Enter on page 1, line 7

- Line 18: OUTSTANDING LIABILITIES (ALL) $50
Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

**Date of Reimbursement:** 4-25-16

**Name of Individual Being Reimbursed:** Vincent Breglia

**Committee Name:** Vincent Breglia for Selectman

**CPF ID Number (if applicable):** 81-1809826  **Telephone Number (optional):** 774-487-8442

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**ITEMIZE EXPENDITURES IN EXCESS OF $50**

<table>
<thead>
<tr>
<th>Date Paid</th>
<th>Vendor Name</th>
<th>Vendor Address</th>
<th>Purpose of Expenditure</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/17</td>
<td>Uprinting</td>
<td>8000 Haskell Ave Van Nuys CA 91406</td>
<td>Campaign Stickers</td>
<td>204.29</td>
</tr>
<tr>
<td>3/13</td>
<td>Vista Print</td>
<td>95 Hayden Ave Lexington MA 02421</td>
<td>Yard Signs</td>
<td>115.24</td>
</tr>
<tr>
<td>3/31</td>
<td>Imprint</td>
<td>14550 Beechuka St Houston TX 77083</td>
<td>Yard Signs</td>
<td>139.69</td>
</tr>
<tr>
<td>4/5</td>
<td>Crown &amp; Anchor</td>
<td>247 Commeria St Provincetown MA 07667</td>
<td>Meet &amp; Greet</td>
<td>240.75</td>
</tr>
<tr>
<td>4/8</td>
<td>Uprinting</td>
<td>8000 Haskell Ave Van Nuys CA 91406</td>
<td>Campaign Stickers</td>
<td>279.99</td>
</tr>
</tbody>
</table>

(Include items listed on Page 2) → Line 1: Expenditures in excess of $50 (itemized above): 979.96

Line 2: Expenditures $50 or under (not itemized): 0

Line 3: TOTAL AMOUNT REIMBURSED: 979.96

Signed under the penalties of perjury:

Signature of Candidate / Treasurer: [Signature]

Date: 4-25-16

Please prepare a separate report for each reimbursement check issued by the committee.