



Commonwealth of Massachusetts

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.

RECEIVED
TOWN CLERK
NANTUCKET
MAR 11 2011
P. 11

Fill in dates:

Reporting Period Beginning Month 01 Date 20 Year 2011 Ending Month 03 Date 29 Year 2011

Type of report: (Check one)

8th day preceding preliminary 18th day preceding election 30 day after election year-end report dissolution

ROBERT R. DECOSTA

Full Name of Candidate (if applicable)

SELECTMAN / NANTUCKET

Office Sought and District

22 SESAPANA ROAD

Residential Address

NANTUCKET MA 02554

Tel. No. (optional)

Committee to Elect Robert DeCosta

Committee Name

KATE W. HOWARD

Name of Committee Treasurer

22 SESAPANA ROAD

Committee Mailing Address

NANTUCKET, MA. 02554

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>2,921.61</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>2,921.61</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>869.32</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>2,052.29</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>625.-</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>1,445.82</u>
Line 8: Name of bank(s) used	<u>NANTUCKET BANK</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.

K. Howard

Signed under the penalties of perjury:

29 Mar 11

Treasurer's signature (in ink)

Date

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

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]

29 Mar 11

Candidate signature (in ink)

Date

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/2/11	JONAS BAKER 9 PINE GROVE LN NANTUCKET MA. 02554	200 00	SELF EMPLOYED - RESTAURANT OWNER
3/2/11	GEORGE BASSETT 54 VESPER LN NANTUCKET MA 02554	200 00	DOCKMASTER NANTUCKET ISLAND RESORTS
3/2/11	MICKEY BEAMISH 4 BAY 8 SURFSIDE DRIVE NANTUCKET MA. 02554	200 00	SELF EMPLOYED HOUSE PAINTER
3/2/11	RYAN CONWAY 74A OLD SOUTH RD NANTUCKET, MA. 02554	100 00	
3/2/11	JANET DE COSTA 4 WAYDALE ROAD NANTUCKET, MA. 02554	100 00	
3/2/11	ANN EGAN 11 PINE CREST DRIVE NANTUCKET MA 02554	100 00	
3/2/11	GAIL ELLIS 83 N. LIBERTY ST. NANTUCKET MA. 02554	150 00	
3/2/11	JESSIE GLIDDEN 263 DAFFODIL LN NANTUCKET MA. 02554	50 00	
3/14/11	NED HENTZ 27 TUBWRECK DR DOVER, MA. 02030	200 00	SELF EMPLOYED BUSINESS
3/2/11	CHRISTINA MARTIN 22 DAFFODIL LN NANTUCKET MA. 02554	100 00	
2/18/11	KEVIN MARTIN 15 HIGHBRUSH PATH NANTUCKET, MA. 02554	200 00	SELF EMPLOYED MARTIN MASONRY, INC.
3/2/11	JAMES OLNEY 100 OLD SOUTH RD. NANTUCKET, MA. 02554	100 00	
3/2/11	WILLIAM PUDER 18 GRAY AVE NANTUCKET, MA. 02554	100 00	
3/2/11	KIMBERLY RAMOS, 55 VESTAL ST. NANTUCKET MA. 02554	200 00	Controller MIALCOMET GOLF CLUB
3/2/11	MARK REID 2 GREEN AVE NANTUCKET MA 02554	100 00	
Line 9: Total receipts in excess of \$50 (or listed above)		2,100 00	
Line 10: Total receipts \$50 and under* (not listed above)		0	
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.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
2/18/11	KARSTEN REINEMO 6 NEWTOWN RD NANTUCKET MA. 02554	100	00	
3/2/11	MARK SONGER 13 CLARA DRIVE NANTUCKET MA. 02554	100	00	
2/18/11	JOHN STACKPOLE 15 TOMS WAY NANTUCKET, MA. 02554	150	00	
3/14/11	LOUIS STATZER 2328 MANS AVE NW WASHINGTON DC 02030	250	00	RETIRED
3/2/11	MICHAEL STURGIS 24 FUNTLOCK RD NANTUCKET MA. 02554	100	00	
Line 9: Total receipts in excess of \$50 (or listed above)		700	00	
Line 10: Total receipts \$50 and under* (not listed above)		121	61	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2921	61	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.
Page 2

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.

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.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
2/22/11	Inquirer & Mirror	1 Old South Rd Nantucket MA 02554	political ad in local paper	208	32
3/14/11	Inquirer & Mirror	1 Old South Rd Nantucket MA 02554	political ad in local paper	325	50
3/21/11	Inquirer & Mirror	1 Old South Road Nantucket MA 02554	political ad in local paper	325	50
Line 12: Expenditures over \$50				859	32
Line 13: Expenditures \$50 and under*				10	00
Line 14: TOTAL EXPENDITURES				869	32

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.

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/2/11	William Puder self employed restaurant owner	16 Gray Avenue Nantucket MA. 02554	Food at "meet + greet" night at the Foregrounds on 3/2/11	375.-
3/2/11	Stephen Kania self employed raw bar business	7 Deer Run Road Nantucket, MA. 02554	time and labor for raw bar service at "meet + greet" on 3/2/11	250.-
Line 15: In-kind over \$50				625.-
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				625.-

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.

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.

Date Incurred	To Whom Due	Address	Purpose	Amount
3/2/11	Stephen Kania	7 Deer Run Road Nantucket MA. 02554	purchase of shellfish for raw bar at "meet + greet"	250.-
2/22/11	Robert DeCosta	22 Sesapana Rd Nantucket MA 02554	reimbursement for bumper stickers	660.-
3/25/11	Robert DeCosta	22 Sesapana Rd Nantucket MA 02554	reimbursement for campaign signs	535.82
Line 18: OUTSTANDING LIABILITIES (ALL)				1,445.82

Enter on page 1, line 7