

# File with: City or Town Clerk of

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 05/	01/2021 Ending Date: 09/30/202
Type of Report: (Check one)	Ω
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Stephen C Kapantais JR	Steve K for Ward 5
Candidate Full Name (if applicable)	Committee Name
	Rosemary Kapantais
Office Sought and District	Name of Committee Treasurer
Councillor Ward 5 Salem MA	
Residential Address	Committee Mailing Address
E-mail: kapantais@gmail.com	E-mail: kapantais@gmail.com
Phone # (optional): 978-882-1188	Phone # (optional): 978-882-1188
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	1500
Line 2: Total receipts this period (page 3, line 1)	3539.31
T' 2 G 1: (1/2 1 1 1 2 0)	5020.24
Line 3: Subtotal (line 1 plus line 2)	5039.31
Line 4: Total expenditures this period (page 5, li	ne 14) 4355.42
Line 4. Total experientaries this period (page 5, in	14)
Line 5: Ending Balance (line 3 minus line 4)	683.89
Line 6: Total in-kind contributions this period (p	age 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
71 0 37 (1 1() 1 5 7 7 7	
Line 8: Name of bank(s) used: St Jeans Credit Uni	on
-	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be	to form large delication and belief a transport and assemble a statement of all comparing formation
activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind	
finance activity of all persons acting under the authority or on behalf of this committee i	n accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Rosemary Rapano	(Treasurer's signature) Date: 10/25/21
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 t	ox only)
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the	ne 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 a	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	g 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	ne best of my knowledge and belief a true and complete statement of all campaign
finance activity, including contributions, loans, receipts, expenditures, disbursement	ts, 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 the	his candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: 10/25/21

### **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.)

D ( D ) 1	Name and Residential Address	A 4	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
5/25/2021	DAN BALENTINE ARLINGTON MA	95.30	PRODUCT SUPPORT SPECIALIST LANTHEUS MEDICAL
6/2/2021	ROBERT CAMIRE 10 FRANCIS ROAD SALEM MA 01970	100	RETIRED
8/10/2021	JEANNINE CARMADA 35 ENDICOTT STREET SALEM MA	250	RETIRED
6/3/2021	JOE CIMAROLI CONGRESS STREET WESTFIELD MA	100	RETIRED
7/17/2021	PATRICK CURTIN 100 HIGHLAND AV SALEM	100	DENTIST
7/10/2021	EDWARD GILMARTIN 18 OCEAN AV SALEM MA	250	RETIRED
05/17/2021	EDWARD GILMARTIN 18 OCEAN AVE SALEM MA	300	RETIRED
6/2/2021	JESSICA HERBERT 70 WEBB STREET SALEM MA	95.30	HISTORIC PRESERVATION CONSULTANT
6/3/2021	CYNTHIA JERZYLO 17 BAYVIEW AVE SALEM MA	95.30	RETIRED
8/16/21	RACHEL KAPANTAIS BOULDER CO	95.30	HOUSEWIFE
6/1/2021	STEVE KAPANTAIS 23A WISTERIA STREET SALEM MA	238.70	ENGINEER
5/14/2021	STEVE KAPANTAIS 23A WISTERIA STREET SALEM MA	400	ENGINEER
Line 9: Total Rece	ripts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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)
5/4/2021	ROSEMARY KAPANTAIS 23 WISTERIA STREET SALEM MA	300	RETIRED
5/25/2021	PAT LABRIE 11 HEMENWAY SALEM MA	200	RETIRED
5/26/2021	ROGER LAMONTAGNE 58 LEACH STREET SALEM MA	150	RETIRED
5/27/21	ANNE STERLING 29 ORCHARD STREET SALEM MA	100	RETIRED
05/17/2021	CHUCK VON BURNS 3 RIVER STREET SALEM AM	100	RETIRED
5/17/2021	CTE JUSTIN WHITTIER SALEM MA	100	POLITICAL COMMITTEE
Line 9: Total Rece	sipts over \$50 (or listed above)	3069.90	
Line 10: Total Reco	eipts \$50 and under* (not listed above)	469.41	
	RECEIPTS IN THE PERIOD	3539.31	← Enter on page 1, line 2 d include only those receipts not itemized above.

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	Adduses	Dumasa of Evnanditura	Amount
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
07/14/2021	CTE Stephen Dibble	Salem MA	Donation	200
07/08/2021	STEPHEN KAPANTAIS	23A WISTERIA STREET SALEM MA	LOAN PAYMENT	700
8/19/2021	STEPHEN KAPANTAIS	23A WISTERIA STREET SALEM MA	LOAN PAYMENT	800
09/30/2021	SALTONSTALL FUNDRAISER	LAFAYETTE STREET SALEM MA	DONATION	62
05/15/2021	Sustainable Digital	Putney, VT 05346 USA	Web Site Decelopment	400
05/29/2021	Sustainable Digital	Putney, Vt 0546 USA	Web Site Development	568
09/23/2021	Thriftco	56 Pulaski St, Peabody, MA 01960	Literature mailings	410.98
05/04/2021 Thriftco	Thriftco	56 Pulaski Ste Peabody MA	Signs, literature art work	1214.44
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	4355.42
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	C
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	4355.42

<sup>\*</sup> 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 B: EXPENDITURES (continued)**

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
		e			
		Line 12: Expenditures over \$50	(or listed above)		
		11 10 70 11 000 1	1 +/ 41 4 1 1		
		Line 13: Expenditures \$50 and	under* (not listed above)	L	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD		
		include them in line 12. Line 13 st			

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures the members 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		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 $6 \rightarrow$	Line 17: TOTAL IN-KIND Co	ONTRIBUTIONS	

<sup>\*</sup> 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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# **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
5/1/2021	STEPHEN KAPANTAIS	23A WISTERIA STREET SALEM AM	LOAN	1500