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

TOWN OF SANDWICH

APR 25 2011

File with:
City or Town Clerk or Election Commission Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning May 1, 2010
Year
Ending April 27, 2011

Type of report: (Check one)
☐ 8th day preceding preliminary ☒ 6th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

FRANK PANNORFI
Full Name of Candidate (If applicable)
Selectman
Office Sought and District
27 Wing Blvd. East
Residential Address
508 888-8517
Tel. No. (optional)

Committee to Elect FRANK PANNORFI
Committee Name
Ann Lorraine Pannorfi
Name of Committee Treasurer
Committee Mailing Address
P.O. Box 848 East Sandwich, MA 02537
508 888-8517
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:
Line 1: Ending balance from previous report $0
Line 2: Total receipts this period (page 2, line 11) $4395.20
Line 3: Subtotal (line 1 plus line 2) $4395.20
Line 4: Total expenditures this period (page 3, line 14) $3072.71
Line 5: Ending balance (line 3 minus line 4) $1322.49
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 Cape Cod Cooperative Bank-Sandwich, MA

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.
Signed under the penalties of perjury:

Ann Lorraine Pannorfi
Treasurer's signature (in ink)

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 or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Frank Pannorfi
Candidate signature (in ink)

Date
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>
</table>
| 2/10/11       | James W. Peace  
                PO Box 244  
                18 Foster Rd. East Sandwich 02537 | 100    |                                             |
| 2/10/11       | Frank Pannorfi  
                PO Box 943  
                East Sandwich, MA 02537 | 1,000  | Loan to Campaign                                          |
| 3/8/11        | David Neal  
                2 Genera Lane  
                Sandwich, MA 02563 | 100    |                                             |
| 3/11/11       | Christine + Kevin Finnigan  
                15 Box 59 Shore Crest  
                Sandwich, MA 02563 | 100    |                                             |
| 3/11/11       | Lisa + Jeff Perry  
                7 Burning Tree Lane  
                Sandwich, MA 02537 | 100    |                                             |
| 3/11/11       | James Killion  
                6 Village Verner Drive  
                Sandwich, MA 02563 | 100    |                                             |
| 3/11/11       | Nancy + Garry Nye  
                Box 1597  
                Sandwich, MA 02563 | 75     |                                             |
| 3/25/11       | David Legg  
                623 RT 6A  
                East Sandwich, MA 02537 | 200    | Retired                                                   |
| 3/25/11       | Phil + Emily Barrette  
                21 RT 6A  
                East Sandwich, MA 02563 | 100    |                                             |
| 4/11          | Elwynn Miller  
                13 Sheep Pastureway  
                East Sandwich, MA 02536 | 100    |                                             |
| 4/11          | Jocelyn + Horace Scheunemann  
                10 Village Drive  
                East Sandwich, MA 02537 | 100    |                                             |
| 4/11          | Tom + Rochelle  
                3 Longhill Drive  
                East Sandwich, MA 02537 | 100    |                                             |
| 4/5/11        | Donna + Steve Powers  
                Box 746  
                Forestdale, MA 02644 | 100    | SELF Employed                                               |
| 4/6/11        | Max Mitten Dorf  
                19 Lakewood Drive  
                East Sandwich, MA 02537 | 100    |                                             |
| 4/7/11        | David + Andrea Souza  
                28 Creston Drive  
                East Sandwich, MA 02537 | 100    |                                             |

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

2,835

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

1560.20

Line 11: TOTAL RECEIPTS IN THE PERIOD  

4,395.20

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.

<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>4/9/11</td>
<td>DAVE NELSON 21 Telegraph Hill Rd. SANDWICH, MA 02563</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>4/11/11</td>
<td>ALLAN + PENELOPE PIECE PO Box 339 E, SANDWICH, MA 02537</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>4/20/11</td>
<td>Johny Rosemary Schulte 12 Boxus Shores Circle SANDWICH, MA 02532</td>
<td>60</td>
<td></td>
</tr>
</tbody>
</table>

TOWN CLERK
TOWN OF SANDWICH

APR 25 2011

10 H 20 M A.M.
RECEIVED & RECORDED

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

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

* 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
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>3/11/11</td>
<td>British Beer Company</td>
<td>RT 14 - Old Kings Hwy., Sandwich, MA 02558</td>
<td>Campaign Kickoff</td>
<td>275.76</td>
</tr>
<tr>
<td>3/15/11</td>
<td>Quaker Process Printing Co. Inc.</td>
<td>13 Bridge Street, Sagamore, MA 02561</td>
<td>Printing</td>
<td>176.38</td>
</tr>
<tr>
<td>3/15/11</td>
<td>East Sandwich Postmaster</td>
<td>RT 6A, 02557 East Sandwich, MA</td>
<td>Stamps</td>
<td>26.40</td>
</tr>
<tr>
<td>3/15/11</td>
<td>Christmas Tree Shops</td>
<td>655 RT 132 Hyannis, MA 02601</td>
<td>Thank you cards</td>
<td>4.25</td>
</tr>
<tr>
<td>3/16/11</td>
<td>Drummer Boy</td>
<td>114 Riverside Ave, New Bedford, MA 588-999-1080</td>
<td>Lawn signs</td>
<td>531.25</td>
</tr>
<tr>
<td>3/17/11</td>
<td>Curley Direct</td>
<td>15 Fauvean Ave, Sunnyvale, MA 02644</td>
<td>Mailing</td>
<td>526.80</td>
</tr>
<tr>
<td>3/26/11</td>
<td>Quaker Process Printing Co. Inc.</td>
<td>10 Bridge Street, Sagamore, MA 02561</td>
<td>Printing</td>
<td>95.43</td>
</tr>
<tr>
<td>4/1/11</td>
<td>East Sandwich Postmaster</td>
<td>RT 6A, E. Sandwich, MA 02557</td>
<td>Stamps</td>
<td>8.80</td>
</tr>
<tr>
<td>4/1/11</td>
<td>The Enterprise Newspapers</td>
<td>50 Depot Avenue, Falmouth, MA 02540</td>
<td>Newspaper Ads (2)</td>
<td>427.50</td>
</tr>
<tr>
<td>4/1/11</td>
<td>Frank Pannozzi</td>
<td>PO Box 843, E. Sandwich, MA 02557</td>
<td>Repayment of loan</td>
<td>1,000.00</td>
</tr>
</tbody>
</table>

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.

| Line 12: Expenditures over $50 | $3,083.26 |
| Line 13: Expenditures $50 and under* | $39.45 |
| Line 14: TOTAL EXPENDITURES | $3,122.71 |
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>
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</table>

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

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.

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>To Whom Due</th>
<th>Address</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
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</table>

Enter on page 1, line 7

Line 18: OUTSTANDING LIABILITIES (ALL)

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.
Form CPF R 1: Itemization of Reimbursements
Office of Campaign and Political Finance

Please print or type all information, except signatures.

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.

Name of Individual Being Reimbursed: FRANK PANNORF

Committee Name: Committee to Elect FRANK PANNORF

Amount of Reimbursement: $1,000.00

Date of Reimbursement: 4/14/2011

ITEMIZE EXPENDITURES IN EXCESS OF $50

<table>
<thead>
<tr>
<th>DatePaid</th>
<th>Vendor Name and Address</th>
<th>Purpose of Expenditure</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/14/2011</td>
<td>FRANK PANNORF</td>
<td>Repayment of Loan</td>
<td>$1,000.00</td>
</tr>
</tbody>
</table>

Expenditures in excess of $50 (listed above) $1,000.00
Expenditures $50 and under (not listed above)

TOTAL AMOUNT REIMBURSED $1,000.00

Signed under the penalties of perjury:

Owen Lorraine Pannorfo
4/25/2011

FRANK PANNORF
4/14/2011

Signature of Candidate/Treasurer

Date

Formerly Form 203A

Please use a separate sheet for each reimbursement check issued.