



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REGISTRAR OF VOTERS

✓

2013 OCT 28 P 2:33
File With: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2013 August 15, 2013 Ending Date: October 28, 2013
CITY OF ORLAND

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

Candidate Full Name (if applicable)
Robert L. Cappucci, Jr.
Office Sought and District
71 Evans St. Medford, MA 02155
Residential Address
Telephone Number (optional): _____

Committee Name
Name of Committee Treasurer
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>N/A</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$74.57</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$74.57</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$74.57</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>N/A</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.
Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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
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: Robert L. Cappucci Jr. (Candidate's signature) Date: October 28, 2013

Amount	Purpose	Address	To Whom Due	Date Incurred
Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) →				

Enter on page 1, line 7 →

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 Received	From Whom Received*	Residential Address	Description of Contribution	Value
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.

Line 15: In-Kind Contributions over \$50 (or listed above)
 Line 16: In-Kind Contributions \$50 & under (not listed 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.

Candidate: Robert Cappucci, Jr.
 Office: Medford City Council
 8th Day before Election Report
 October 28, 2013

X Robert J. Cappucci, Jr.

STAPLES

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 165 Middlesex Ave.
 SOMERVILLE, MA 02146
 (617) 623-7980

SALE	1517705 8 003 96604	
	1715 08/17/13 01:19	
QTY	SKU	PRICE
	REWARDS NUMBER 2823898248	
1	STAPLES 100CT PUSH 718103010313	1.99
1	1IN GLITTER BLUE/R 039956981521	6.99
1	STAPLES INVSBL TAP 718103094672	4.49
1	FOAMBOARD 11X14 BL 079946048896	4.99
SUBTOTAL		18.46
Standard Tax 6.250%		1.15
TOTAL		\$19.61
Cash		20.00
Cash Change		0.39
TOTAL ITEMS		4

Save with Staples Brand products,
 the most trusted brand in office products.

THANK YOU FOR SHOPPING AT STAPLES !

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 444 Broadway (Route 1)
 Saugus, MA 01906
 (781) 231-6860

SALE	1669077 8 003 03471	
	0051 08/10/13 02:33	
QTY	SKU	PRICE
1	WINDOW PAINT MARKE 039956981750	3.99
1	4IN ITALIC READY L 078628027037	6.79
1	4IN ITALIC READY L 078628027020	6.79
1	FOAMBOARD 30X40 WH 079946148367	7.79
SUBTOTAL		25.36
TOTAL		\$25.36
Cash		26.00
Cash Change		0.64
TOTAL ITEMS		4

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165 Middlesex Ave.
SOMERVILLE, MA 02145
(617) 623-7980

SALE 1517705 8 003 07456
1715 10/12/13 02:28

YOUR OPINION COUNTS AND WILL BE REVIEWED
BY THIS STORE'S MANAGER!

Please take a short survey
and be entered into a monthly drawing
for a \$5,000 Staples gift card.
NO PURCHASE NECESSARY.

Log on to www.StaplesCares.com
or call 1-800-881-1723

Your survey code: 0100 3665 4721 2900
See store for rules.

Survey code expires 10/19/2013.

***Tome nuestra encuesta en Español en
la página de Internet o por telefono.
Consiga las reglas en la tienda.***

QTY	SKU	PRICE
	REWARDS NUMBER 2823898248	
1	FOAMBOARD 30X40 WH 079946148367	7.79
1	PERMANENT GLUESTIC 071709001643	2.99
1	4IN ITALIC READY L 078628027037	6.79
1	4IN ITALIC READY L 078628027020	6.79
	SUBTOTAL	24.36
	Standard Tax 6.250%	1.52
	TOTAL	\$25.88
	Cash	40.00
	Cash Change	14.12
	TOTAL ITEMS	4

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More doing.™

75 MYSTIC AVE.
SOMERVILLE, MA 02145 (617)623-0001

2667 00002 68870 10/12/13 02:42 PM
CASHIER DAVID - DXR4351

0000-596-019 D-21 CULL <A,U> 0.51
D-21 CULL LUMBER

SUBTOTAL 0.51
SALES TAX 0.03
TOTAL \$0.54
CASH 1.00
CHANGE DUE 0.46

<U> - NON-DISCOUNTABLE ITEM



2667 02 68870 10/12/2013 6283

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
A 1 90 01/10/2014
THE HOME DEPOT RESERVES THE RIGHT TO
LIMIT / DENY RETURNS. PLEASE SEE THE
RETURN POLICY SIGN IN STORES FOR
DETAILS.

BUY ONLINE PICK-UP IN STORE
AVAILABLE NOW ON HOMEDEPOT.COM.
CONVENIENT, EASY AND MOST ORDERS
READY IN LESS THAN 2 HOURS!

ENTER FOR A CHANCE
TO WIN A \$5,000
HOME DEPOT GIFT
CARD!

Share Your Opinion With Us! Complete
the brief survey about your store visit
and enter for a chance to win at:

www.homedepot.com/opinion

COMPARTA SU OPINION EN UNA BREVE
ENCUESTA PARA LA OPORTUNIDAD DE GANAR.

User ID:
140696 138031

Password:
13512 138029

Entries must be entered by 11/11/2013.
Entrants must be 18 or older to enter.
See complete rules on website. No
purchase necessary.

armacy

ME, MEDFORD, MA
STORE: 391-3299

#1083076 STR#252

2.99T

2.99

.19

3.18

20.00

16.82



2862 6440 18
IPT THRU 12/12/2013

10:32 AM

EXTRACARE CARD

4 HOURS AT CVS.COM

*Candidate:
Robert Cappucci, Jr.
office: Methuen
City
Council
8th day before
Election Report.
October 28, 2013
Robert E. Cappucci, Jr.

CVS/pharmacy

55 RIVERSIDE AVENUE, MEDFORD, MA
PHARMACY: 395-1515 STORE: 391-3299

REG#01 TRN#2644 CSHR#1083076 STR#252

Helped by: JANICE

1 CRAZY GLU ORIG 585 EACH 2.99

SUBTOTAL 2.99

MA 6.25% TAX .19

TOTAL 3.18

CASH 20.00

CHANGE 16.82



2500 2523 2862 6440 18
RETURNS WITH RECEIPT THRU 12/12/2013

OCTOBER 13, 2013 10:32 AM

GET YOUR CVS EXTRACARE CARD

THANK YOU. SHOP 24 HOURS AT CVS.COM

Candidate: Robert Cappucci, Jr.

office: Medford City Council

8th Day before Election report

October 28, 2013

X Robert L. Cappucci, Jr.