



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2026 OCT 2 AM 11:32

BARNSTABLE TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Ending Date:

Type of Report: (Check one)

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

☒ ALAN FELTHAM
Candidate Full Name (if applicable)
XTOWN OF BARNSTABLE P13
Office Sought and District
535 OCEAN ST. HYANNIS, MA
Residential Address
E-mail: feltham535@gmail.com
Phone #: 774 275 4100

Committee Name
Thomas Doherty
Name of Committee Treasurer
500 OCEAN ST #35 02601
Committee Mailing Address
E-mail: tom.doherty84@gmail.com
Phone #: 203-209-3367

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	—
Line 2: Total receipts this period (page 3, line 12)	4,146.00
Line 3: Subtotal (line 1 plus line 2)	4,146.00
Line 4: Total expenditures this period (page 5, line 15)	3,615.16
Line 5: Ending Balance (line 3 minus line 4)	530.84
Line 6: Total in-kind contributions this period (page 6, line 18)	—
Line 7: Total (all) outstanding liabilities (page 7, line 19)	—
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	—
Line 9: Name of bank(s) used:	Rockland Trust - MAIN ST HYANNIS 02601

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: Thomas Doherty (Treasurer's signature)

Date: 10/1/2026

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 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Alan Feltham

(Candidate's signature)

Date: 10/1/2026

SCHEDULE A: RECEIPTS

1.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/29/26	Richard + Marg. Beaser 500 Ocean St 02601 #119	\$50.	
8/28	Cash From Multi: Meet + Greet.	\$500	
8/31	Cash From Multi Meet + Greet.	\$300	
9/2	Cash From Meet + Greet	\$40	
9/23	Cash From Pizza Party Donations	\$81	
8/26	AND: Carol 253 Sea St 02601	\$100	
8/25	Richard Cook 500 Ocean St 02601 #139	\$100	
8/25	Bill Cooney 500 Ocean St #128 02601	\$100	
7/17	Laura Cronin 402 South St 02601	\$50	
9/1	Jeff Condiro 851 Fairway Ter. Naples Florida 34601	\$50	
9/10	Deb Dugan Box 897 HYANNIS 02601	\$50	
9/11	Carol Ann Dawber 500 OCEAN #19 02601	\$75	
9/22	John + Dot DeYouage 500 Ocean St #66 02601	\$50	

SCHEDULE A: RECEIPTS

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Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/17	Tom Doherty 500 Ocean St #35 02601	\$50	
9/14	Ray Doherty 500 Ocean St #3 02601	\$200	Retired
8/29	Pam Duffy 500 Ocean St 02601 #54	\$100	
9/18	Steven Duffy 500 Ocean St 02601 #78	\$100	
9/18	Tina Duffy 271 Concord Rd Weyland MA 01778	\$75	
9/10	Catherine Gulliver Box 739 Haverhill MA 02647	\$100	
9/2	Paula Garrow 500 Ocean St #137 02601	\$100	
9/8	Joe Hoffmann 15 Darsy Bluff LA Hy. 02601	\$500	Retired
9/16	R & M. Travella 166 Boylston St Newington CT 06111	\$25	
9/2	John Julius 140 Chase St Haverhill 02601	\$100	
9/3	Tom Kilbridge 500 Ocean St #48 02601	\$100	
9/12	Athene Halmer 569 Swaggetown Rd Greenville NY 12302	\$100	
9/9	Bill Kowen 133 Gosbold St 02601	\$100	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/12	Steve Leek 174 MARSTON Ave H.P. 02647	\$100	
8/20	Karen + Brian McGuire Box 29 02647, H.P.	\$250	Retired
9/21	Jim Deville 800 Andrews Ave #16 DELRAY Florida 33483	\$50	
8/28	Jackie Newsen 61 Channell Rd 02601	\$100	
8/29	N. Pillenger 9 Schooner Lane 02601	\$100	
7/24	UTA Quint 220 Bay Shore Rd 02601	\$50	
9/14	UTA Quint 220 Bay Shore Rd 02601	\$50	
9/11	Gary Reche 4 Sylva Dr 02601	\$50	
8/27	Dan Scioletti 500 Ocean St #140 02601	100	
8/27	Brian + Karen Zecchi Zecchiwell 500 Ocean St #148 02601	100	

Line 10: Total Receipts over \$50 (or listed above)

Line 11: Total Receipts \$50 and under (not listed above)

Line 12: TOTAL RECEIPTS IN THE PERIOD

\$4,146.00

* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.



Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/25	CAWA Fed Ex	297 North St Hy - 02601	500 Rock Cards	\$ 170.00
9/14	Daily Paper	246 Main St Hymms 02601	Breakfast Meet.	20.19
9/22	Daily Paper	246 Main St Hymms 02601	Breakfast Meet	\$ 22.80
9/8	E BAY	online	INK	\$ 18.64
9/8	E BAY	online	INK	\$ 16.25
9/8	K.P. GASS	149 North St 02601	Door to Door CAMPAIGNING	\$ 20.00
9/11	K.P. GASS.	149 North St 02601	Door to Door CAMPAIGNING	26.00
9/24	New England Pizza	187 West Main Hy 02601	Meet & Greet	\$ 84.00
9/3	North St STATION	240 North St 02601	CAMPAIGNING	\$ 26.00
8/24	Post Office	Main St 02601 Hymms	mailings	\$ 65.60
9/3	Post Office	Main St 02601 Hymms	mailings	\$ 83.64
8/5	Rockland Trust	765 Main St Hy Hymms 02601	checks	\$ 5.66
8/25	Sign it	68 Center St suite 18 Hy 02601	75 Signs -	\$ 596.32

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/9	Sign it	68 Center St Suite 18 02601	100 Signs	\$ 607.22
8/25	Staples	425 Tyannough Rd Hyannis 02601	copies	\$ 2.89
9/2	Staples	"	Print Maps	\$ 356.05
9/3	Staples	"	copy	\$ 1.80
9/3	Staples	"	supplies	\$ 25.47
9/4	Staples	"	supplies	\$ 30.13
9/4	Staples	"	copies	\$ 37.25
9/8	Staples	"	Copy	\$.72
9/8	Staples	"	flyers	\$ 89.07
9/9	Staples	"	Flyers	\$ 115.81
9/11	Star Market	625 West Main Hy 02601	Refreshments For Meet + Greet	\$ 154.49
9/28	Sunderland	115 Enterprise Rd Hy 02601	Postcards + Bulk Postage	\$ 1039.16

* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.

Line 13: Expenditures over \$50 (or listed above)	3,615.16
Line 14: Expenditures \$50 and under (not listed above)	
Line 15: TOTAL EXPENDITURES IN THE PERIOD	3,615.16

Enter on page 1, line 4 →

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 or less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

[illegible]

** If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.*

Line 16: In-Kind Contributions over \$50 (or listed above)

Line 17: In-Kind Contributions \$50 and under (not listed above)

Enter on page 1, line 6 →

Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 →		Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)		

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)			<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i> ← Enter on page 1, line 8
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)			
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD			

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