

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
COMMITTEE TO ELECT ADAM CHAPRALES

ADDRESS (number and street) PO BOX 554
 Check if different than previously reported. (ACC) WEST BARNSTABLE MA 02668

2. **FEC IDENTIFICATION NUMBER** C C00518720
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
MA 09

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
08 / 18 / 2012 through 09 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dana Snyder

Signature of Treasurer Dana Snyder *[Electronically Filed]* Date M M / D D / Y Y Y Y
10 / 15 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

COMMITTEE TO ELECT ADAM CHAPRALES

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6260.00	44477.00
(b) Total Contribution Refunds (from Line 20(d))	5000.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1260.00	39477.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6954.02	42586.03
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6954.02	42586.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-3109.03	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

COMMITTEE TO ELECT ADAM CHAPRALES

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5490.00	35822.00
(ii) Unitemized.....	770.00	7105.00
(iii) TOTAL of contributions from individuals ▶	6260.00	42927.00
(b) Political Party Committees.....	0.00	500.00
(c) Other Political Committees (such as PACs).....	0.00	1050.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6260.00	44477.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	6260.00	44477.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6954.02	42586.03
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5000.00	5000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	11954.02	47586.03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2584.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6260.00
25. SUBTOTAL (add Line 23 and Line 24).....	8844.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11954.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-3109.03

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Arthur Chaprales		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address P.O. Box 1812		Transaction ID : SA11AI.4783	
City Hyannis	State MA	Zip Code 02501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Restaurant Accounting Solution	Occupation Owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. Aynaz Chaprales		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 02 / 2012	
Mailing Address 2059 Main Street		Transaction ID : SA11AI.4812	
City Marstons Mills	State MA	Zip Code 02648	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer Jordan Hospital	Occupation Nurse		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 610.00		

Full Name (Last, First, Middle Initial) C. Mike Defilippis		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2012	
Mailing Address 100 Cranberry Highway		Transaction ID : SA11AI.4800	
City Sagamore	State MA	Zip Code 02561	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00	
Name of Employer Self	Occupation Auto Repair		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 240.00		

SUBTOTAL of Receipts This Page (optional).....	1840.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Kurt Engelsen		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2012	
Mailing Address PO Box 2093		Transaction ID : SA11AI.4796	
City Cotuit	State MA	Zip Code 02635	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Northwing Construction	Occupation President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Evengelia Kounadis		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2012	
Mailing Address PO Box 474		Transaction ID : SA11AI.4788	
City West Yarmouth	State MA	Zip Code 02673	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer NA	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. David W Leary		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2012	
Mailing Address 623 Route 6A		Transaction ID : SA11AI.4801	
City East Sandwich	State MA	Zip Code 02537	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 18	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

A. Full Name (Last, First, Middle Initial)
Jason Stone

Mailing Address 307 Bridge Street

City Chatham State MA Zip Code 02668

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2012

Transaction ID : SA11AI.4791

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mark Thompson

Mailing Address PO Box 1776

City Hyannis State MA Zip Code 02601

FEC ID number of contributing federal political committee. **C**

Name of Employer LP Lorusso Foundation Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2012

Transaction ID : SA11AI.4814

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

5490.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. 2 Cent Autocalls		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 10 Tremont Street Suite 14		Amount of Each Disbursement this Period 579.92 Transaction ID : SB17.4855
City Boston State MA Zip Code 02108	Purpose of Disbursement Robo Call 004 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) B. 2 Cent Autocalls		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 10 Tremont Street Suite 14		Amount of Each Disbursement this Period 711.72 Transaction ID : SB17.4863
City Boston State MA Zip Code 02108	Purpose of Disbursement Robo Calls 004 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) c. Alex Adinolfi		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address 216 Fandalwood Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4895
City Cotuit State MA Zip Code 02635	Purpose of Disbursement Intern Stipend 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1791.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Matthew Christopher Bechstein		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 2059 Main Street		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4888
City Marstons Mills	State MA	
Zip Code 02648	Purpose of Disbursement Political/Campaign Consulting	Category/ Type 001
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MA District: 09	

Full Name (Last, First, Middle Initial) B. Matthew Christopher Bechstein		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address 2059 Main Street		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4896
City Marstons Mills	State MA	
Zip Code 02648	Purpose of Disbursement Political/Campaign Consulting	Category/ Type 001
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MA District: 09	

Full Name (Last, First, Middle Initial) c. Curley Direct		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address 15 Fruean Avenue		Amount of Each Disbursement this Period 159.38 Transaction ID : SB17.4893
City South Yarmouth	State MA	
Zip Code 02664	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	859.38
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 5959 Las Colinas Blvd.		Amount of Each Disbursement this Period 8.96 Transaction ID : SB17.4857
City Irving	State TX	
Zip Code 75039	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MA District: 09	

Full Name (Last, First, Middle Initial) B. Gulf		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address 150 Main Street		Amount of Each Disbursement this Period 56.17 Transaction ID : SB17.4831
City Middleboro	State MA	
Zip Code 02346	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MA District: 09	

Full Name (Last, First, Middle Initial) c. Hess		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address 411 Main Street		Amount of Each Disbursement this Period 59.92 Transaction ID : SB17.4832
City South Yarmouth	State MA	
Zip Code 02664	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MA District: 09	

SUBTOTAL of Disbursements This Page (optional).....	125.05
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Hess		Date of Disbursement MM / DD / YYYY 08 / 21 / 2012
Mailing Address 411 Main Street		Amount of Each Disbursement this Period 66.74
City South Yarmouth	State MA	
Zip Code 02664	Purpose of Disbursement Fuel	Transaction ID : SB17.4833
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA	District: 09	

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement MM / DD / YYYY 08 / 28 / 2012
Mailing Address 411 Main Street		Amount of Each Disbursement this Period 39.68
City South Yarmouth	State MA	
Zip Code 02664	Purpose of Disbursement Fuel	Transaction ID : SB17.4840
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA	District: 09	

Full Name (Last, First, Middle Initial) C. Hess		Date of Disbursement MM / DD / YYYY 08 / 30 / 2012
Mailing Address 411 Main Street		Amount of Each Disbursement this Period 73.25
City South Yarmouth	State MA	
Zip Code 02664	Purpose of Disbursement Fuel	Transaction ID : SB17.4846
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA	District: 09	

SUBTOTAL of Disbursements This Page (optional).....	179.67
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Hess		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 411 Main Street		Amount of Each Disbursement this Period 68.10 Transaction ID : SB17.4853
City South Yarmouth State MA Zip Code 02664	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 411 Main Street		Amount of Each Disbursement this Period 69.92 Transaction ID : SB17.4887
City South Yarmouth State MA Zip Code 02664	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) c. Quantum of Cape Cod		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 154 Barnstable Road		Amount of Each Disbursement this Period 1850.00 Transaction ID : SB17.4844
City Hyannis State MA Zip Code 02601	Purpose of Disbursement Production and Airtime 004 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

SUBTOTAL of Disbursements This Page (optional).....	1988.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2012
Mailing Address 910 Louisiana Street		Amount of Each Disbursement this Period 72.40
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Fuel	Category/Type 002	Transaction ID : SB17.4836
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address 910 Louisiana Street		Amount of Each Disbursement this Period 61.35
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Fuel	Category/Type 002	Transaction ID : SB17.4838
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 910 Louisiana Street		Amount of Each Disbursement this Period 50.02
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Fuel	Category/Type 002	Transaction ID : SB17.4850
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

SUBTOTAL of Disbursements This Page (optional).....	183.77
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Shell Oil			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012	
Mailing Address 910 Louisiana Street			Amount of Each Disbursement this Period 73.00	
City Houston	State TX	Zip Code 77002	Transaction ID : SB17.4854	
Purpose of Disbursement Fuel		Category/ Type 002		
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MA	District: 09			

Full Name (Last, First, Middle Initial) B. Shell Oil			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012	
Mailing Address 910 Louisiana Street			Amount of Each Disbursement this Period 20.00	
City Houston	State TX	Zip Code 77002	Transaction ID : SB17.4868	
Purpose of Disbursement Fuel		Category/ Type 002		
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MA	District: 09			

Full Name (Last, First, Middle Initial) c. Shell Oil			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012	
Mailing Address 910 Louisiana Street			Amount of Each Disbursement this Period 51.00	
City Houston	State TX	Zip Code 77002	Transaction ID : SB17.4873	
Purpose of Disbursement Fuel		Category/ Type 002		
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MA	District: 09			

SUBTOTAL of Disbursements This Page (optional).....	144.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 910 Louisiana Street		Amount of Each Disbursement this Period 71.91
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Fuel	Category/Type 002	Transaction ID : SB17.4878
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 910 Louisiana Street		Amount of Each Disbursement this Period 42.01
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Fuel	Category/Type 002	Transaction ID : SB17.4886
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 364 Barnstable Road		Amount of Each Disbursement this Period 52.05
City Hyannis	State MA Zip Code 02601	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : SB17.4851
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

SUBTOTAL of Disbursements This Page (optional).....	165.97
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 364 Barnstable Road		Amount of Each Disbursement this Period 5.53 Transaction ID : SB17.4865
City Hyannis State MA Zip Code 02601	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 364 Barnstable Road		Amount of Each Disbursement this Period 24.23 Transaction ID : SB17.4871
City Hyannis State MA Zip Code 02601	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) c. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 414 Nathan Ellis Highway		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.4860
City Mashpee State MA Zip Code 02649	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 09		

SUBTOTAL of Disbursements This Page (optional).....	69.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 414 Nathan Ellis Highway		Amount of Each Disbursement this Period 41.99
City Mashpee State MA Zip Code 02649	Category/Type 002	
Purpose of Disbursement Fuel	Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Transaction ID : SB17.4883
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 09	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. WATD Radio		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 130 Enterprise Drive		Amount of Each Disbursement this Period 435.00
City Marshfield State MA Zip Code 02050	Category/Type 004	
Purpose of Disbursement Production and airtime.	Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Transaction ID : SB17.4843
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 09	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	476.99
TOTAL This Period (last page this line number only).....	5984.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 18	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT ADAM CHAPRALES

Full Name (Last, First, Middle Initial) A. John W Dalton		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1157 Hancock Street		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.4890
City Quincy State MA Zip Code 02169	Purpose of Disbursement 010 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) B. Linda Tryder-Dalton		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1157 Hancock Street		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.4891
City Quincy State MA Zip Code 02169	Purpose of Disbursement 010 Category/Type	
Candidate Name COMMITTEE TO ELECT ADAM CHAPRALES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: MA District: 09		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00