



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

DUE 3/30/15

1.1.2015

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1.1.2015 Ending Date: 3.19.2015

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

Stor C. GAUTHIER
Candidate Full Name (if applicable)

PLANNING BOARD
Office Sought and District

8 HANDY ROAD BLACKSTONE, MA 01504.
Residential Address

Telephone Number (optional): _____

NONE
Committee Name

NONE
Name of Committee Treasurer

NONE
Committee Mailing Address

Telephone Number (optional): _____

*Town Clerk
Town of Blackstone
MAR 30 2015
RECEIVED*

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</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>NONE</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 and no activity independent of the 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 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: John C. Gauthier (Candidate's signature) Date: 3.30.2015



Town Clerk Form CPF M 102: Campaign Finance Report
Town of Blackstone
 APR 06 2015
 RECEIVED

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

Commonwealth of Massachusetts

Time: _____

1-1-15

3-29-15

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3-21-15 Ending Date: 3-26-15 DPL

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

David P. KEEFE
 Candidate Full Name (if applicable)
Board of Selectmen
 Office Sought and District
269 Main St
 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>0.</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>858.49</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>-858.49</u>
Line 6: Total in-kind contributions this period (page 6)	<u>858.49</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>-0-</u>
Line 8: Name of bank(s) used:	_____

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 and no activity independent of the 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 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: [Signature] (Candidate's signature) Date: 3-26-15

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 (alphabetical listing)	Address	Purpose of Expenditure	Amount
3-25-15	American Beauty Signworks	345 Providence St Wausatchet RI	Campaign Signs	858.49
Line 12: Total Expenditures over \$50 (or listed above)				858.49
Line 13: Total Expenditures \$50 and under* (not listed above)				-0-
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				858.49

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized 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
3-25-15	NICK BIKI	Farm St Blackstone	PAID \$400.00 FOR CAMPAIGN SIGNS	\$400.00
3-25-15	DAW KEEFE	Main St Blackstone	PAID \$458.49 FOR CAMPAIGN SIGNS	\$458.49
Line 15: In-Kind Contributions over \$50 (or listed above)				858.49
Line 16: In-Kind Contributions \$50 & under (not listed above)				- 0 -
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				858.49

* 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.



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

City or Town of: _____

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	_____			Ending	_____	

Type of Report: (Check One)			
<input type="checkbox"/> 8th day preceding preliminary/primary	<input checked="" type="checkbox"/> 8th day preceding election	<input type="checkbox"/> 30th day following election (Town or Special)	<input type="checkbox"/> 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1-15-15	<i>[Signature]</i>	43 FARM ST	PART & REC
1-20-15	<i>[Signature]</i>	98 Federal St	BUA
2-11-15	<i>[Signature]</i>	549 SUMMER PLACE	Housing Authority
4-6-15	<i>[Signature]</i>	130 EDIN ST	Board of Selectmen
4/6/15	<i>[Signature]</i>	194 Farm St	School Comm.
4-6-15	<i>[Signature]</i>	FARM ST	BOH
4-7-15	<i>[Signature]</i>	106 ELM ST	PLANNING BOARD





Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

City or Town of: _____

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	_____			Ending	_____	

Type of Report: (Check One)			
<input type="checkbox"/> 8th day preceding preliminary/primary	<input type="checkbox"/> 8th day preceding election	<input checked="" type="checkbox"/> 30th day following election (Town or Special)	<input type="checkbox"/> 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE <small>Signed under the penalties of perjury</small>	II. RESIDENTIAL ADDRESS <small>(Street and Number)</small>	III. OFFICE SOUGHT
1-15-15	<i>Donald E. ...</i>	43 FARM ST	PARK REC
1-20-15	<i>[Signature]</i>	98 Federal St	BoA
2-11-15	<i>[Signature]</i>	549 Summer Place	Housing Authority
4-6-15	<i>[Signature]</i>	130 Elm St.	Board of Selectmen
4-16-15	<i>[Signature]</i>	194 Farm St	School Comm.
4-16	<i>[Signature]</i>	43 FARM	BoA
4-16-15	<i>[Signature]</i>	106 Elm St	PLANNING BOARD





Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

City or Town of: Blackstone

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Ending	Month	Day	Year
Reporting Period Beginning	4	26	2015		12	31	2015

Type of Report: (Check One)

8th day preceding preliminary/primary
 8th day preceding election
 30th day following election (Town or Special)
 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE <small>Signed under the penalties of perjury</small>	II. RESIDENTIAL ADDRESS <small>(Street and Number)</small>	III. OFFICE SOUGHT
12-15-15	<i>Kevin J. Ryan</i>	43 Farm St.	Board of Health
12-15	<i>Patrick Ryan Sr</i>	43 Farm St	T.B.C.H.
12-15	<i>Paul J. Ryan</i>	130 Elm St.	BOS
12-15	<i>John J. Ryan</i>	56 Edgewater	BOS
12-15	<i>Margaret Birk</i>	132 Farm St.	BOS
12-16	<i>Frank J. Ryan</i>	107 Summer St	MODERATOR
	<i>Lynn J. Moran</i>	48 Mendon St	BLK. Housing
1-2-16	<i>Thomas J. Ryan</i>	98 Federal St	BOA
1-14-16	<i>Janet C. Ryan</i>	24 Devlin Circle	BOA
1-21-16	<i>Cheryl Masco-Ryan</i>	10 David Drive	Constable
1-21-16	<i>Robt H Martintelli</i>	1 Dollard St	Constable
1-26-16	<i>Kevin J. Ryan</i>	106 Elm St	Blackstone Planning Board





Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Town Clerk
Town of Blackstone
JAN 26 2016
Time:
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-15 Ending Date: 12-31-15

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

Ryan Chamberland
Candidate Full Name (if applicable)
Selectman
Office Sought and District
231 Main St, Blackstone, MA 01504
Residential Address
 Telephone Number (optional): _____

Committee to elect ryan chamberland
Committee Name
Dan Spencer
Name of Committee Treasurer
231 Main St, Blackstone, MA 01504
Committee Mailing Address
 Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>\$957.64</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$100.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$1057.64</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$270.16</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$787.48</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>Dean Bank</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: [Signature] (Treasurer's signature) Date: 1/20/16

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
 Candidate with Committee and no activity independent of the 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 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: Ryan Chamberland (Candidate's signature) Date: 1-20-16



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Town Clerk
Blackstone
JAN 13 2016
Time: _____
RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-15 Ending Date: 12-31-15

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

ROBERT A. DRAINVILLE
Candidate Full Name (if applicable)

Office Sought and District

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>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</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>NONE</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: Robert A. Drainville (Treasurer's signature) Date: 1-6-16

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

Candidate with Committee and no activity independent of the 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 OR Candidate with independent activity filing separate report

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Signed under the penalties of perjury: _____ (Candidate's signature) Date: _____



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Town Clerk
Town of Blackstone

JAN -4 2016

File with: City or Town Clerk Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-15 Ending Date: 12-31-15

Type of Report: (Check one)

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

Gerald P. Rivet
Candidate Full Name (if applicable)

Planning Board
Office Sought and District

12 Prospect St.
Residential Address

Telephone Number (optional): 508-883-2588

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</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: N/A (Treasurer's signature) Date: _____

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

Candidate with Committee and no activity independent of the 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.

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Signed under the penalties of perjury: Gerald P. Rivet (Candidate's signature) Date: 12-18-15



Town Clerk
Form CPF M 102: Campaign Finance Report
 Town of Blackstone
 DEC 11 2015
 Time: _____
RECEIVED

Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-15 Ending Date: 12-31-15

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

PAUL E MARVELLE
 Candidate Full Name (if applicable)

 Office Sought and District
171 Mendon st Blackstone MA
 Residential Address
 Telephone Number (optional): 508-876-9011

PLANNING BOARD
 Committee Name

 Name of Committee Treasurer

 Committee Mailing Address
 Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	_____
Line 3: Subtotal (line 1 plus line 2)	_____
Line 4: Total expenditures this period (page 5, line 14)	_____
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	_____
Line 7: Total (all) outstanding liabilities (page 7)	_____
Line 8: Name of bank(s) used:	_____

Affidavit of Committee Treasurer:
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 Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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

Candidate with Committee and no activity independent of the committee
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 Signed under the penalties of perjury: Paul E Marvella (Candidate's signature) Date: 12-10-15



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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

Candidate Full Name (if applicable)

Office Sought and District

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	<input type="text" value="0"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="0"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="0"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="0"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="0"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="0"/>
Line 8: Name of bank(s) used:	<input type="text" value="0"/>

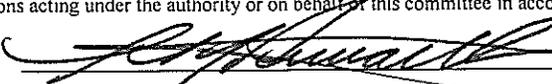
Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind 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 and no activity independent of the committee
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Candidate without Committee OR Candidate with independent activity filing separate report
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Signed under the penalties of perjury:  (Candidate's signature) Date:

