



Form CPF M 102: Campaign Finance Report

Municipal Form Office of Campaign and Political Finance

Town Clerk
Town of Blackstone
MAR 21 2017
RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 02/13/2017 Ending Date: _____

Type of Report: (Check one)

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

CATHERINE M. NORCROSS-MELSON
Candidate Full Name (if applicable)

SELECTMAN
Office Sought and District

6 LAUREL ROAD, BLACKSTONE, MA 01504
Residential Address

E-mail: _____

Phone # (optional): 5082891130

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	204.32
Line 4: Total expenditures this period (page 5, line 14)	204.32
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	204.32
Line 7: Total (all) outstanding liabilities (page 7)	0
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: 3/21/17

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
03.02.2017	IMPRINT	14550 BEECHNUT STREET HOUSTON, TX	LAWN SIGNS	131.84
02.19.2017	VISTAPRINT	275 WYMAN STREET WALTHAM, MA 02451	POST CARDS	72.48
Line 12: Total Expenditures over \$50 (or listed above)				204.32
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				204.32

* 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
03/01/2017	CATHERINE M NORCROSS-MELSON	6 LAUREL ROAD BLAACKSTONE, MA 01504	PERSONAL DONATION CASH	204.32
Line 15: In-Kind Contributions over \$50 (or listed above)				204.32
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				204.32

* 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.

cathymelson@mail.com

From: <cathymelson@mail.com>
Date: Sunday, February 19, 2017 5:10 PM
To: <cmelson@comcast.net>
Subject: Fw: Your Vistaprint Order Is Confirmed

From: Vistaprint
Sent: Sunday, February 19, 2017 4:55 PM
To: cathymelson@mail.com
Subject: Your Vistaprint Order Is Confirmed

Your Vistaprint Order Confirmation



[Add Vistaprint to your address book](#)

My Account: 8986-2363-7301

THANK YOU FOR YOUR ORDER Your Order Number: **7BWQ6-74A48-2R8** • [Track It](#)

Hi, Catherine.

Your order will be on its way soon. Look for the shipping confirmation email in your inbox.

Questions? Visit our [help page](#) or [contact us](#) directly.

To check the status of your order at any time, [click here](#).

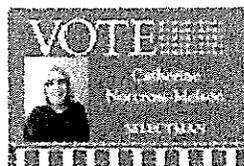
Here are your order details:

Order Date: **2/19/2017**
 Delivery Option (*): **Standard**

(*): If your order contains bags, they will ship separately and will arrive within 9-11 business days.

You can expect to receive your order in 5 Business Days.

Order Summary



Small Postcards

Small Postcard
 Qty: 1000

Base Price		\$75.00 \$44.99
Black & White Back Side	1000	\$19.00 \$14.24
80lb one-sided Glossy with UV Varnish		INCLUDED
Item Total		\$59.23

Merchandise: \$59.23
 Shipping Charges: \$8.99
 Sales Tax: \$4.26

Total: \$72.48

Sold By

Vistaprint Netherlands BV
Hudsonweg 8
Venlo, The Netherlands 5928LW

Shipping To:

Catherine Norcross-Melson
6 Laurel Road
Blackstone MA 01504
US

Billed To:

Catherine Norcross-Melson
6 Laurel Road
Blackstone MA 01504
US

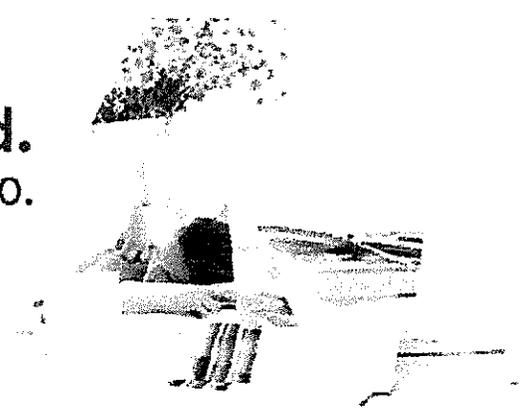
Need Help?

[Click here to contact our Customer Care Team](#)



You refer. We reward.
You and a friend can each get \$10.

Refer now



At the time of this promotion, the maximum amount of money that can be earned is \$100.

[Update Email](#) | [Privacy Policy](#) | [Contact Us](#)

This email address is unmonitored, so please don't reply.
Offers expire 3/16/2017, at 11:59 PM (PT).

Limit one promo code per order. Savings will be reflected in your shopping cart. Discounts may vary by quantity and design and can't be applied to shipping and processing, taxes, subscription or design services, previous purchases or products on the Vistaprint Promotional Products site, unless otherwise specified. Additional fees may apply for shipping and processing, and taxes, unless otherwise noted. Free offers valid only on the lowest quantity of each product and not valid on more than 2 items per order.

Vistaprint may change or cancel this offer at any time. See website for details.

If you need help regarding your order, please feel free to contact our sale representative at TOLL FREE **1-855-712-4467** or [Click Here](#) to submit a ticket to us.

Please note: This e-mail message was sent from a notification-only address that cannot accept incoming e-mail. Please do not reply to this message.

Thanks again for shopping with us.

Imprint.Com

14550 Beechnut St.

Houston, TX

Sale: 1-855-712-4467

Customer Service: 713-332-2715

cathymelson@mail.com

From: "Imprint.Com" <no-reply@imprint.com>
Date: Tuesday, March 07, 2017 6:25 PM
To: <cathymelson@mail.com>
Subject: Your Imprint.Com Order (#IM9D7C649989)



Thanks for your order, Catherine Norcross-melson!

If you need to make an order please visit our website at Imprint.Com or call us at TOLL FREE 1-855-712-4467.



Purchasing Information:

Email Address: cathymelson@mail.com

Billing Address:

Catherine Norcross-melson
6 Laurel Rd
Blackstone, MA 01504
US

Shipping Address

Catherine Norcross-melson
6 Laurel Rd
Blackstone, MA 01504
US

Payment Method: Credit Card

Order Subtotal: \$73.60

Coupon Discount: -\$7.36

C/H & Insurance: 5.46

Production/Shipping: 60.14

Order Total: \$131.84

Notes: Purchases will appear in your bank/credit card statement as Netbrands Media Corp

Our W9 can be download at <https://imprint.com/pdf/W9.pdf>

Order Summary:

Order #: IM9D7C649989

Order Status: Pending

Item #1:

Product: Custom 12" x 18" Yard Signs

Quantity: 20

Customize {"Product Color Hex": "0056a3", "Product Color Hex Back": "FFFFFF", "Number of Imprint

Details: Colors: "1 Imprint Color", "Wire Stand": "Yes [+0.99]"}

Delivery By Mar 14, 2017 (\$60.14)

Total for this Item: \$131.84



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 02/13/2017 Ending Date: 04/03/2017

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

Catherine Norcross-Melson
Candidate Full Name (if applicable)
Selectman
Office Sought and District
6 Laurel Road, Blackstone MA 01504
Residential Address
E-mail: cathymelso
Phone # (optional): 5082891130

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail: Town Clerk
Town of Blackstone
Phone # (optional):
APR 25 2017

SUMMARY BALANCE INFORMATION:		Time: _____
Line 1: Ending Balance from previous report		0
Line 2: Total receipts this period (page 3, line 11)		0
Line 3: Subtotal (line 1 plus line 2)		0
Line 4: Total expenditures this period (page 5, line 14)		50.00
Line 5: Ending Balance (line 3 minus line 4)		0
Line 6: Total in-kind contributions this period (page 6)		50.00
Line 7: Total (all) outstanding liabilities (page 7)		0
Line 8: Name of bank(s) used:	<input type="text"/>	

RECEIVED

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: Catherine Norcross-Melson (Candidate's signature) Date: 4/27/17

Blackstone Enlightener
 96 Federal Street
 Blackstone, MA 01504

Invoice

Date	Invoice #
4/12/17	32153

Bill To	Ship To
Catherine Norcross-Melson 6 Laurel Road Blackstone, MA 01504	

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
			4/12/17			
Quantity	Item Code	Description			Price Each	Amount
	Advertising	Advertising April political advertising			50.00	50.00
<i>paid 1836 Cle# 1836 3/27 4150: -</i>						
Total						\$50.00

We appreciate your business. If you should have any questions please call 508-883-2848.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Town Clerk
Town of Blackstone
MAR 27 2017
Time: 9:35 AM *dmb*
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: JAN 1 2017 Ending Date: MARCH 26 2017

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

DANIEL T. DOYLE
Candidate Full Name (if applicable)
TOWN MODERATOR
Office Sought and District
5 STATE ST. BLACKSTONE
Residential Address
E-mail: dtdoyl@comcast.net
Phone # (optional): 508-294-4055

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (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.

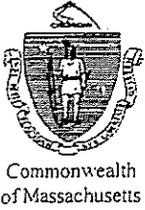
Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: _____

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: 3-26-17



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: 3-25-17 Ending Date: 3-27-17

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

Jack Robert Keene
Candidate Full Name (if applicable)
School Committee BMRSD
Office Sought and District
269 Main St, Blackstone
Residential Address
E-mail: Jack.Keene@outlook.com
Phone # (optional): 774-287-2944

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$0.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$0.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$160.50</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>-\$160.50</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$0.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$0.00</u>
Line 8: Name of bank(s) used:	<u>NONE</u>

Town Clerk
Town of Blackstone
MAR 27 2017
TIME RECEIVED

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: 3-26-17



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Clerk
Town of Blackstone
MAR 28 2017
Time: _____
RECEIVED
File with: ~~City or Town Clerk or Election Commission~~

Fill in Reporting Period dates: Beginning Date: 3-19-17 Ending Date: 3-28-17

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

MARK POIRIER
Candidate Full Name (if applicable)
Moderator
Office Sought and District
246 Mendon St.
Residential Address
Telephone Number (optional): 508 962 3113

Committee Name

Name of Committee Treasurer

Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	_____
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 100.00</u>
Line 3: Subtotal (line 1 plus line 2)	_____
Line 4: Total expenditures this period (page 5, line 14)	<u>\$ 100.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 000.00</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:
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: _____ (Candidate's signature) Date: 3/26/17

Xpression Prints, Inc

31 Hayward Street
Suite I-1
Franklin, MA 02038

Invoice

Date	Invoice #
3/19/2017	1711007

Bill To
Mark Poirier 246 Mendon Streer Blackstone, MA 01504

Ship To

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
Coro Signs	Due on receipt	VD	3/19/2017			

Quantity	Item Code	Description	Price Each	Amount
12	Coro	18 X 24 Coro sign State of Massachusetts sales tax	8.33333 6.25%	100.00 0.00

Total			\$100.00
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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

CAROL J. FERRAULT
Candidate Full Name (if applicable)
BOARD OF HEALTH
Office Sought and District
338 MAIN ST. BLACKSTONE, MA
Residential Address
E-mail: CJPF1455@COMCAST.NET
Phone # (optional): 508-883-4321

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
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: Carol Ferrault (Candidate's signature) Date: 3-29-17

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.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← 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.



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: 03/27/2017

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

John P. Parmentier
Candidate Full Name (if applicable)
Board of Selectmen
Office Sought and District
196 Farm St. Blackstone MA
Residential Address
E-mail: _____
Phone # (optional): (508) 883-7754

Committee Name
Name of Committee Treasurer: Town Clerk
Town of Blackstone
Committee Mailing Address
E-mail: _____
Phone # (optional): _____
Time: _____
RECEIVED

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$0.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$0.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$0.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$0.00</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$0.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$0.00</u>
Line 8: Name of bank(s) used:	<u>NOT APPLICABLE</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 P. Parmentier (Candidate's signature) Date: 03/27/2017



Form CPF M 102: Campaign Finance Report

Office of Campaign and Political Finance

Town Clerk
Town of Blackstone

MAR 27 2017

Time: _____
RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 12-JAN-17 Ending Date: 27-MAR-17

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

Stephen P. Gaudreau
Candidate Full Name (if applicable)

Selectman Blackstone MA
Office Sought and District

10 Castagnone Way Blackstone MA
Residential Address

Telephone Number (optional): 774-462-1258

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>1,000 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,000 -</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>778.35</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>221.65</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: 27-MAR-17

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: _____ (Candidate's signature) Date: _____

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2 3-21-17	Town Clerk	15 St. Paul St Blackstone MA	Printed Election Data	7.95
2 3-24-17	American Beauty Signworks	345 Providence St. Woonsocket RI	Lawn Signs	360
3-23-17	American Beauty Signworks	345 Providence St. Woonsocket RI	Lawn Signs	410.40
Line 12: Expenditures over \$50 (or listed above)			778.35	
Line 13: Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD			778.35	

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.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Town Clerk
Town of Blackstone
MAY 03 2017
Time: 2:15 PM
RECEIVED
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3/28/17 Ending Date: 4/3/17

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

Stephen P. Goudreau
Candidate Full Name (if applicable)
Selectman, Blackstone MA
Office Sought and District
6 Castagnaro Way Blackstone MA
Residential Address
E-mail: sgou@comcast.net
Phone # (optional): _____

Committee Name

Name of Committee Treasurer

Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	\$ 221.65
Line 2: Total receipts this period (page 3, line 11)	\$ 808.73
Line 3: Subtotal (line 1 plus line 2)	\$ 1,030.38
Line 4: Total expenditures this period (page 5, line 14)	\$ 1,030.38
Line 5: Ending Balance (line 3 minus line 4)	\$ 0
Line 6: Total in-kind contributions this period (page 6)	\$ 0
Line 7: Total (all) outstanding liabilities (page 7)	\$ 0
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: _____ (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: 5/3/17



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

Gerald P. Rivet
Candidate Full Name (if applicable)
Board of Selectman
Office Sought and District
12 Prospect St.
Residential Address
E-mail: grivet113@aol.com
Phone # (optional): 508-883-2588

Committee Name

Name of Committee Treasurer

Committee Mailing Address
E-mail: _____
Phone # (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>\$500.-</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:	_____

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: Gerald P. Rivet (Candidate's signature) Date: 3-28-17



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
MAY -9 2017
FILED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3-17 Ending Date: 4-17

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

GERALD PAUL RIVET
Candidate Full Name (if applicable)

Board of Selectman
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>\$535.-</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>0</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: Gerald Paul Rivet (Candidate's signature) Date: 5-8-17

