



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 Please print or type all information, except signatures.

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

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

James Chauvin
Full Name of Candidate (if applicable)
Treasurer
Office Sought and District
113A Lake St
Residential Address
Tel. No. (optional)

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	<u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>0</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>1738</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>1738</u>

Line 6: Total in-kind contributions this period (page 4)	\$	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<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 (in ink) Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:
Jan Ch...
Candidate signature (in ink) Date

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.

This page may be copied 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)
4-3-15	James Chauvin 113A Lakeside	669	Town of Webster Custodian
4-8-15	James Chauvin 113A Lakeside	600	Town of Webster Custodian
5-12-15	James Chauvin 113A Lakeside	469	Town of Webster Custodian
Line 9: Total receipts in excess of \$50 (or listed above)		1738	
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1738	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.

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.

This page may be copied 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	
4-3-15	Daisy Print	183 main st webster	50 2 sided Signs + banner	669	00
4-8-15	webster Times Telegram Gazette	Stonebridg press Southbrige	ADvertisement in newspaper	600	00
5-12-15	Universal TAG	36 Hall rd Dudley MA	mailers + Postage	469	00
Line 12: Expenditures over \$50				1738	
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				1738	

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.



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Month Date Year Month Date Year

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

Robert J. Miller
Full Name of Candidate (if applicable)
Selectman

366 School St. Webster, MA 01570
Office Sought and District
Residential Address

508-943-0045
Tel. No. (optional)

Committee to Re-Elect Robert Miller
Committee Name
Robt J Miller
Name of Committee Treasurer
366 School St. Webster MA 01570
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ _____

Line 2: Total receipts this period (page 2, line 11) \$ 1876.31

Line 3: Subtotal (line 1 plus line 2) \$ _____

Line 4: Total expenditures this period (page 3, line 14) \$ 1876.31

Line 5: Ending balance (line 3 minus line 4) \$ 0

Line 6: Total in-kind contributions this period (page 4) \$ _____

Line 7: Total (all) outstanding liabilities (page 4) \$ 0

Line 8: Name of bank(s) used Hometown Bank

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.

Robert Miller
Treasurer's signature (in ink) Signed under the penalties of perjury: June 3, 2015
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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.

Robert Miller
Candidate signature (in ink) Signed under the penalties of perjury: June 3, 2015
Date

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.

This page may be copied 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)
6/3/15	Robert J. Miller, 366 School St Woburn, MA 01870	461 31	Self.
	Fund raised	1415 ⁰⁰	
Line 9: Total receipts in excess of \$50 (or listed above)	461	31	
Line 10: Total receipts \$50 and under* (not listed above)	1415	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD	1876	31	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.

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.

This page may be copied 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	
4/4/15	Universal Tag, Inc	36 Hume Rd Dudley, MA 01928	push pieces	361	34
6/3/15	Universal Tag, Inc.	36 Hume Rd Dudley, MA 01928	masters.	1514	97
Line 12: Expenditures over \$50				1876	31
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				1876	31

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.



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Fill in dates: Reporting Period Beginning Month 04 Date 01 Year 2015 Ending Month 06 Date 03 Year 2015

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

Randall V. Becker
Full Name of Candidate (if applicable)
Selectman
Office Sought and District
77 Bates Point Rd
Residential Address
Webster MA
Tel. No. (optional)

N/A
Committee Name
Name of Committee Treasurer
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>7606.26</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>7606.26</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>7606.26</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>Sandover 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.
N/A Signed under the penalties of perjury:
Treasurer's signature (in ink) _____ Date _____

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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.
Randall B Signed under the penalties of perjury:
Candidate signature (in ink) _____ Date 6-3-2015

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.

This page may be copied 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)
4/1/15 →				
6/2/15	Randall Becker 77 Bates Point Rd Webster MA	7606	26	EVP = CFO MAPFRE USA 211 Main St. Webster MA 01570
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		7606	26	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.
Page 2

