

Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance MAY 10 2021 AM11:55

| of Massachusetts | File with: City or Town Clerk or Election Commission |
|--|---|
| Fill in Reporting Period dates: Beginning Date: Ma | Ch 29, 202 Ending Date: May 10, 202 |
| Type of Report: (Check one) ☐ 8th day preceding preliminary | 30 day after election year-end report dissolution |
| Richard Beaulieu Candidate Full Name (if applicable) Selectboard Office Sought and District 20 Aldrich St. Granby, Mt. Residential Address E-mail: Ykbeaulieu @ yahoo com Phone # (optional): 1-4/3-530-1992 | Committee to elect Richard Beauliea Committee Name Name of Committee Treasurer 20 Aldrich St. Granky MA. 01033 Committee Mailing Address E-mail: Phone # (optional): |
| SUMMARY BALANC | CE INFORMATION: |
| Line 1: Ending Balance from previous report | |
| Line 2: Total receipts this period (page 3, line 11 | 225,00 |
| Line 3: Subtotal (line 1 plus line 2) | 22500 |
| Line 4: Total expenditures this period (page 5, li | ne 14) 225 700 |
| Line 5: Ending Balance (line 3 minus line 4) | Ø |
| Line 6: Total in-kind contributions this period (p | page 6) 🔯 |
| Line 7: Total (all) outstanding liabilities (page 7 | |
| Line 8: Name of bank(s) used: UMK55 Five C | College Credit Union |
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I | d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 5-9-2021 |
| activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporti | the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ing period that are not otherwise disclosed in this report. |
| Candidate without Committee I certify that I have examined this report including attached schedules and it is, to a finance activity, including contributions, loans, receipts, expenditures, disburseme campaign finance activity of all persons acting under the authority or on behalf of | this candidate in accordance with the requirements of M.G.E. c. 33. |
| Signed under the penalties of perjury. Juhan Beau | (Candidate's signature) |

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) |
|--------------------|--|----------|---|
| 3/17/21 | Richard Beaulieu 20 Aldrich St. | \$225.00 | MASS. Triel Coot |
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| Line 9: Total Rece | eipts over \$50 (or listed above) | 225.700 | |
| Line 10: Total Rec | eipts \$50 and under* (not listed above) | | |
| | RECEIPTS IN THE PERIOD | 225 % | Enter on page 1, line 2 Id include only those receipts not itemized above. |

^{*} 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 A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
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| Line 9: Total Re | ceipts over \$50 (or listed above) | | |
| | ceipts \$50 and under* (not listed above) | | |
| | 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.

SCHEDULE B: EXPENDITURES

from committee records, and reported on line 13. 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.

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

| * 15 | | | | | | | | 3/17/21 | Date Paid |
|--|--|---|--|--|--|--|--|--|-------------------------------------|
| Enter on page 1, line $4 \rightarrow \begin{bmatrix} 1 & 1 & 1 \\ 1 & 1 & 1 \end{bmatrix}$ | | | | | | | | AGE. Graphks | To Whom Paid (alphabetical listing) |
| Line 14: TOTAL EXPENDITURES IN THE PERIOD | Line 13: Total Expenditures \$50 and under* (not listed above) | Line 12: Total Expenditures over \$50 (or listed above) | | | | | | 5223 (State Route 240 Long Botton, 0410 45743 | Address |
| JRES IN THE PERIOD | and under* (not listed above) | ਮਾ \$50 (or listed above) | | | | | | | Purpose of Expenditure |
| 125.00 | | 225 100 | | | | | | 225, 00 | Amount |

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized

SCHEDULE B: EXPENDITURES (continued)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount | | | |
|---|--|-------------------------------------|------------------------|--------|--|--|--|
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| | | Line 12: Expenditures over \$5 | 50 (or listed above) | | | | |
| | Line 13: Expenditures \$50 and under* (not listed above) | | | | | | |
| Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | | | | |
| | Enter on page 1, line 4 | or include them in line 12. Line 13 | | | | | |

^{*} 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 |
|---------------|---------------------------|--------------------------------|---------------------------------|-------|
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| | | Line 15: In-Kind Contributions | over \$50 (or listed above) | ø |
| | | Line 16: In-Kind Contributions | \$50 & under (not listed above) | k |
| • | Enter on page 1, line 6 → | Line 17: TOTAL IN-KIND CO | ONTRIBUTIONS | 28 |

^{*} 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.

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SCHEDULE D: LIABILITIES

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

| Date Incurred | To Whom Due | Address | Purpose | Amount |
|---------------|-------------|---------|--------------------------|----------|
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| | | | ANDING LIABILITIES (ALL) | b |



Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE 10 2021 AM11:55 MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

| candidate's commi | ttee as follows: | | | |
|---|--|--|---|--|
| CANDIDATE: | Full Name: | Richard Beaulieu | | |
| | Residential Address: | 20 Aldrich St. | | |
| | City / State / Zip: | Granby, Ma. 01033 | | |
| | E-Mail Address: rkl | beaulieu@yahoo,com | Phor | ne #: 413-530-1992 |
| | Party Affiliation: | Democrat | | (If applicable |
| OFFICE SOUG | HT/PURPOSE: | | | |
| | Title: | Slectboard | | |
| | District: | | | |
| COMMITTEE: | Name of Committee: | Commitée to elect Richard | | |
| | Committee Mailing Ad | | ittee must include the candidate's last name) | |
| | City / State / Zip: | Granby, Ma. 01033 | Phone | c#: 413-530-1992 |
| OFFICERS: | | | | |
| Chair: R | Richard Beaulieu | | Treasurer*: Jod, A. Mo | rrione |
| Residential Address: | 20 Aldrich St. | | Residential Address: 16 Aldrich | St. |
| City / State / Zip: | Granby, Ma. 01033 | | City / State / Zip: Granby | MA 01033 |
| Phone #: 413-530- | -1992 | | | orrione @ comcast. nel |
| Other Office of Fide | | | *A public employee may not serve as treasurer of | of any political committee (see reverse). |
| Other Officer/Title: | | | Other Officer/Title: | |
| Residential Address: | | | Residential Address: | |
| City / State / Zip: | | | City / State / Zip: | |
| Phone #: | (Complete and | d attach a Form CPF M A 101 if necess | Phone #: ary, with other officers and finance committee, if | fany.) |
| behalf. I am aware to the relevant election. | he filing of this commit hat candidates are requi | ttee. I understand that a candidate s ired to keep detailed accounts and re | hall not give consent to the organization of ecords of all campaign finance activity for a | more than one committee on his/her |
| | | Candidate's signatu | ire | • |
| that: 1) I am subject and records of all car | to certain duties and lia mpaign finance activity ployee, I must resign th | bilities under M.G.L. c. 55, including for a period of six years from the d | that I am not a public employee as defined ing the timely filing of campaign finance rep ate of the relevant election; 2) if after my ac- resignation; and 3) a candidate may not serv | oorts and keeping detailed accounts ecceptance of this office I become an |
| SIGNED UNDER T | HE PENALTIES OF P | ERJURY: Treasurer's signature | Momone | Date: 5-9-2021 |
| | ffice of Chairman of th HE PENALTIES OF P | | R. C | |

Chair's signature



Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

| City or Town of: | Granby | | | Please print or type all information, except signatures. | | | | | |
|--------------------|---|--|--|--|--|--|--|--|--|
| Reporting Period | d: Beginning: May I |), 202 ((MM/DD/YYYY) | Ending: | June 17, 2021 | | | | | |
| Type of Report: (0 | Type of Report: (Check One) | | | | | | | | |
| 8th day preced | ling preliminary/primary 2 8th day | preceding election 30th day follo | owing election (town or special) | 20th day of January (Year-End report) | | | | | |
| 2. I certify tha | at I am a candidate for or currently hold N | | ligations during this reporting period | d, and do not have a campaign fund in existence. | | | | | |
| DATE | PRINT NAME | SIGNATURE Signed under the penalties of perjury | RESIDENTIAL ADDRES (Street and Number) | SS OFFICE SOUGHT | | | | | |
| B/9/21 | Richard Beaulieu | Michael Bearle | 20 Aldrich St Gran | Ly Selectboard | | | | | |
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