



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
CITY OF METHUEN
METHUEN, MA
2015 OCT 26 AM 11:00

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1, 2015 Ending Date: Oct 23, 2015

Type of Report: (Check one)

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

Kenneth Willette Jr.	Committee to Elect Ken Willette
Candidate Full Name (if applicable)	Committee Name
West District Councilor	Brad J. Gosselin
Office Sought and District	Name of Committee Treasurer
2 Canoebeola St. Methuen, MA 01844	P.O. Box 2019 Methuen, MA 01844
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	38.38
Line 2: Total receipts this period (page 3, line 11)	715
Line 3: Subtotal (line 1 plus line 2)	753.38
Line 4: Total expenditures this period (page 5, line 14)	585
Line 5: Ending Balance (line 3 minus line 4)	163.38
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:	Merrimack Valley Federal Credit Union

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: Oct 23, 2015

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: Oct 23, 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.

(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)
Oct 6, 2015	Charles Bonanno 64 Bonanno Ct. Methuen, MA 01844	25	
Oct 6, 2015	Larry Giordano 76 Bonanno Ct. Methuen, MA 01844	25	
Oct 6, 2015	Aidan Flynn 6 Myona St. Methuen, MA 01844	60	
Oct 6, 2015	Joseph Quarterone P.O. Box 532 Andover, MA 01810	40	
Oct 6, 2015	Robert Vogler 95 Currier St. Methuen, MA 01844	20	
Oct 6, 2015	Al Delano 94 Myrtle St. Methuen, MA 01844	100	
Oct 6, 2015	Brad J. Gosselin 3 Vine Street Methuen, MA 01844	50	
Oct 6, 2015	Shaun Toohey 696 Crystal St. Haverhill, MA 01832	50	
Oct 6, 2015	Daniel Grayton 31 Varnum Ave. Methuen, MA 01844	25	
Oct 6, 2015	Jennifer Kannan 10B Grandview Rd. Methuen, MA 01844	50	
Oct 6, 2015	Lisa Yarid-Ferry 5 Tanglewood Cir. Methuen, MA 01844	30	
Oct 6, 2015	Barbara Grondine 4 Moody Ave. Methuen, MA 01844	20	
Line 9: Total Receipts over \$50 (or listed above)		160	
Line 10: Total Receipts \$50 and under* (not listed above)		335	
Line 11: TOTAL RECEIPTS IN THE PERIOD		495	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Oct 6, 2015	Dennis Deeb 50 Conrad St. Methuen, MA 01844	25	
Oct 6, 2015	Jana Dinatale 170 Bay State Rd. Methuen, MA 01844	25	
Oct 6, 2015	John V. Fernandes 320 Purchase St. Milford, MA 01757	100	
Oct 6, 2015	Sean P. Riley 137 Purchase St. Milford, MA 01757	30	
Oct 19, 2015	Lynne M. Kumm 180 Old Ferry Rd. Methuen, MA 01844	20	
Oct 19, 2015	Thomas Damario 23 Damon Ave. Melrose, MA 02176	20	
Line 9: Total Receipts over \$50 (or listed above)		100	
Line 10: Total Receipts \$50 and under* (not listed above)		120	
Line 11: TOTAL RECEIPTS IN THE PERIOD		220	← 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.

(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
Oct 20, 2015	U.S.P.S.	150 E. Main St. Westborough, MA 01581	Stamps for Campaign Mailing	200
Oct 23, 2015	Staples	176 S. Broadway Salem, NH 03079	Flyers for Campaign	100
Oct 23, 2015	Methuen Life	P.O. Box 485 Windham, NH 03057	Ad for Campaign	285
Line 12: Total Expenditures over \$50 (or listed above)				585
Line 13: Total Expenditures \$50 and under* (not listed above)				0
<div style="display: flex; justify-content: space-between;"> Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD </div>				585

* 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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SCHEDULE B: EXPENDITURES (continued)[illegible]

* 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
			Line 15: In-Kind Contributions over \$50 (or listed above)	0
			Line 16: In-Kind Contributions \$50 & under (not listed above)	0
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

* 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.

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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

0