Office of Campaign and Fundeat Finance

of Massachusetts	City or Town Clerk or Election Commissi		
Fill in Reporting Period dates: Beginning Date: Janua	uary 1, 2015 Ending Date: October 16, 2015		
Γype of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution		
Paul Beauchemin Candidate Full Name (if applicable)	Committee to Elect Paul Beauchemin Committee Name		
	Carmen Beauchemin		
Ward 2 Councillor-Fitchburg Office Sought and District	Name of Committee Treasurer		
101 St. Andrew Street, Fitchburg, MA	101 St. Andrew Street, Fitchburg, MA		
Residential Address	Committee Mailing Address		
Telephone Number (optional): 9783457010	Telephone Number (optional): 9783457010		
SUMMARY BALAN	CE INFORMATION:		
Line 1: Ending Balance from previous report	\$183.99		
Line 2: Total receipts this period (page 3, line 11	1) 50.00		
Line 3: Subtotal (line 1 plus line 2)	233.99		
Line 4: Total expenditures this period (page 5, li	e 14) 107.29		
Line 5: Ending Balance (line 3 minus line 4)	126.70		
Line 6: Total in-kind contributions this period (p	(page 6) 0		
Line 7: Total (all) outstanding liabilities (page 7	7) \$850.00		
Line 8: Name of bank(s) used: Rollstone Bank and	nd Trust		
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: EOP CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1)	(Treasurer's signature) Date: 10/23/2015		

Candidate with Committee and no activity independent of the committee

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

(alphabetical listing required)	

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

Date Paid	tures. Please include your comm To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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added together from the committee's records and included in line to on page 1. Value Description of Contribution **Residential Address** From Whom Received* Date Received Line 15: In-Kind Contributions over \$50 (or listed above)

Date Incurred	To Whom Due	Address	Purpose	Amount
9/1/2013	Paul R, Beauchemin	101 St. Andrews Street Fitchburg,MA	Loan	\$850.00
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