



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ORLEANS TOWN CLERK

'16 MAY 3 1:38PM

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 03/01/2016 Ending Date: 04/29/2016

Type of Report: (Check one)

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

RIICHARD A. LARAJA
Candidate Full Name (if applicable)

Selectman, Town of Orleans MA
Office Sought and District

11 Uncle Ben's Way, Orleans MA 02653
Residential Address

E-mail: RAL@c4.net

Phone # (optional): _____

Committee to Elect Dick Laraja Selectman
Committee Name

Marilyn M. Bruneau
Name of Committee Treasurer

P.O. Box 321, East Orleans MA 02643-0321
Committee Mailing Address

E-mail: lynn.bruneau2@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	8,030
Line 3: Subtotal (line 1 plus line 2)	8,030
Line 4: Total expenditures this period (page 5, line 14)	2,489.10
Line 5: Ending Balance (line 3 minus line 4)	5,540.90
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>Santander (Orleans MA Branch)</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: Marilyn M. Bruneau (Treasurer's signature) Date: 5/3/2016

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: R. Laraja (Candidate's signature) Date: 5/3/16

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)
	See Attached for Detail		
Line 9: Total Receipts over \$50 (or listed above)		7,670	
Line 10: Total Receipts \$50 and under* (not listed above)		360	
Line 11: TOTAL RECEIPTS IN THE PERIOD		8,030	← 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.

Date Recvd	Name	Res Addr	Mail Addr	Amount	Occupation	Employer
4/2/2016	Amman, Paul & Marjorie	18 West Road, Orleans MA 02653	P.O. Box 1253, East Orleans MA 02643	\$ 100.00		
4/25/2016	Blakeley, Katherine	23 Beach Plum, Orleans MA 02653	P.O. Box 1923, Orleans MA 02653	\$ 100.00		
4/25/2016	Blakeley, Paul	23 Beach Plum, Orleans MA 02653	P.O. Box 1923, Orleans MA 02653	\$ 100.00		
3/8/2016	Bradley, Mary Allen	4 Ettas Way, Orleans, MA 02653	4 Ettas Way, Orleans, MA 02653	\$ 250.00	Veterinarian	Self-employed
4/11/2016	Bradley, Mary Allen	4 Ettas Way, Orleans, MA 02653	4 Ettas Way, Orleans, MA 02653	\$ 70.00		
3/2/2016	Bruneau, Marilyn M.	2 Seacrest Drive, Orleans MA 02653	P.O. Box 321, East Orleans, MA 02643	\$ 1,000.00	Retired	NA
3/15/2016	Carron, Anne	7 Areys Lane, Orleans, MA 02653	P.O. Box 213, South Orleans, MA 02662	\$ 125.00		
3/15/2016	Carron, Mark	7 Areys Lane, Orleans, MA 02653	P.O. Box 213, South Orleans, MA 02662	\$ 125.00		
3/15/2016	Daly, Edward J.	20 Driftwood Ln, Orleans MA 02653	P.O. Box 816, East Orleans, MA 02643	\$ 150.00		
3/15/2016	Daly, Elizabeth A.	20 Driftwood Ln, Orleans MA 02653	P.O. Box 816, East Orleans, MA 02643	\$ 150.00		
4/22/2016	Daly, Stephen G. & Maureen A.	96 Marblebridge Rd, N. Andover MA 01845	96 Marblebridge Rd, N. Andover MA 01845	\$ 150.00		
4/18/2016	deGranahl, F.A.	20 Ocean Club Drive, Amelia Isld FL 32034	20 Ocean Club Drive, Amelia Isld FL 32034	\$ 1,000.00	Retired	NA
3/15/2016	Dunford, David	11 Portside Lane, Orleans, MA 02653	P.O. Box 774, South Orleans, MA 02662	\$ 250.00	Consultant	Self-employed
4/5/2016	Lane, Gary H.	7 Hofe Road, Orleans MA 02653	7 Hofe Road, Orleans MA 02653	\$ 100.00		
3/2/2016	Laraja, Richard A.	21 Uncle Ben's Way, Orleans, MA 02653	21 Uncle Ben's Way, Orleans, MA 02653	\$ 2,000.00	Attorney	Laraja & Kanaga PC
3/7/2016	Montgomery, Herb	60 Baron's Way, Brewster, MA 02631	195 Rt. 6A / Suite 6, Orleans, MA 02653	\$ 100.00		
4/6/2016	O'Meara, Peter H. & Susan L.	4 Little Marsh Lane, S. Orleans MA 02662	P.O. Box 799, South Orleans MA 02662	\$ 100.00		
4/9/2016	Ratcliffe, Kenneth R.	91 Pochet Road, East Orleans MA 02643	P.O. Box 1171, East Orleans MA 02643	\$ 500.00	Retired	NA
4/18/2016	Ritchie, Pamela M.	47 Winslow, South Orleans, MA 02662	P.O. Box 647, South Orleans MA 02662	\$ 100.00		
4/18/2016	Ritchie, William H.	47 Winslow, South Orleans, MA 02662	P.O. Box 647, South Orleans MA 02662	\$ 100.00		
4/7/2016	Shactman, David I.	21 Forest Way, South Orleans MA 02662	P.O. Box 659, South Orleans MA 02662	\$ 100.00		

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
	See Attached for Detail			
Line 12: Total Expenditures over \$50 (or listed above)				2,489.10
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				2,489.10

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.

