



**Form CPF M101 BQ: STATEMENT OF ORGANIZATION
BALLOT QUESTION COMMITTEE
MUNICIPAL FORM**

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, of the organization of a ballot question committee as follows:

RECEIVED
 2024 APR 24 P 3:16
 TOWN OF FRANKLIN
 TOWN CLERK

1. Name (See note 1):	<u>VoteNoFranklin</u>
2. Committee mailing address:	<u>35 Marvin Ave</u>
City/State/Zip:	<u>Franklin</u> MA <u>02038</u>
E-mail Address:	<u>votenofranklin@gmail.com</u> Phone #: <u>508-530-1986</u>
3. Purpose / specific issues and interests (See note 2):	<u>Community focused on keeping Franklin's taxes low.</u>
4. Topic of question & question no., if known:	<u>Special election for a tax override.</u>
5. This committee is formed to (check one):	<input type="checkbox"/> support or <input checked="" type="checkbox"/> oppose the question.

6. OFFICERS:	
Chairman: <u>Dashe Videira</u> Residential Address: <u>35 Marvin Ave</u> City / State / Zip: <u>Franklin</u> MA <u>02038</u> Phone #: <u>508-530-1986</u>	Treasurer*: <u>Michael Videira</u> Residential Address: <u>35 Marvin Ave</u> City / State / Zip: <u>Franklin</u> MA <u>02038</u> Phone #: <u>401-368-9266</u> E-mail: <u>videira99@gmail.com</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>
Other Officer/Title: <u>Jane Callaway-Tripp / Secretary</u> Residential Address: <u>607 Maple Street</u> City / State / Zip: <u>Franklin</u> MA <u>02038</u> Phone #: <u>774-571-1017</u>	Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____
<small>(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)</small>	

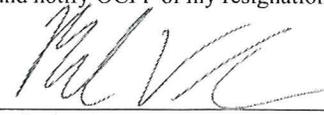
The chairman and treasurer of a political committee should be aware that provisions of M.G.L. c. 55 specify that each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts for a period of six years from the date of the relevant election. Chapter 55 also specifies that no expenditures shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents; and, that all funds of a political committee shall be kept separate from any personal funds of any officers, members or associates of such committee.

I hereby accept the office of Chairman of the above-named committee.
SIGNED UNDER THE PENALTIES OF PERJURY:


 _____ Date: 04/23/2024
 Chairman's signature

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; and 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation.

SIGNED UNDER THE PENALTIES OF PERJURY:


 _____ Date: 04/23/24
 Treasurer's signature



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

TOWN OF FRANKLIN
TOWN CLERK

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: **2024 JUN -3 P 2:13** Beginning Date: 4/23/24 Ending Date: 6/3/24

Type of Report: (Check one) **RECEIVED**

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

Candidate Full Name (if applicable): _____

Office Sought and District: _____

Residential Address: _____

E-mail: _____

Phone #: _____

voteNOfranklin Ballot Question Committee

Committee Name

Michael Videira

Name of Committee Treasurer

35 Marvin Ave Franklin, MA 02038

Committee Mailing Address

E-mail: votenofranklin@gmail.com

Phone #: 401-368-9266

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 12)	<u>2,441.68</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2,441.68</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>1,547.88</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>893.80</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>57.12</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Rockland Trust</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: [Signature] (Treasurer's signature) Date: 6/2/24

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: _____

1 of 8

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities.

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/9/24	Alan R. Earls 23 Marin Ave Franklin, MA	300	Self-Employed (freelance writer)
5/10/24	Angela Spring 4 Rocky Road Franklin, MA	20	
5/19/24	Brian Quick 18 Opal Circle Franklin, MA	50	
5/9/2024	Bryna Morehouse 15 October Dr. Franklin, MA	20	
5/10/24	Christine Gruner 904 Washington St. Franklin, MA	150	
5/2/24	Diana Lewis 7 Uncas Brook Row Franklin, MA	26.25	
5/14/24	Diane OToole 270 Maple St. Franklin, MA	103.48	
5/22/24	Frank Falvey 920 Pond Street Franklin, MA	160	
5/9/24	George Nakhoul 1 Iron Gate Dr. Franklin, MA	103.48	
5/16/24	Jacqueline Maciel 95 Elm Street Franklin, MA	40	
5/17/24	Jane Zeman 12110 Tullamore ct. Unit 104 Lutherville Timonium, MD	103.48	
5/9/24	Joseph Evans 5 Tam O Shanter Rd Franklin, MA	150	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/14/24	Kyle Thompson 8 Mercer Ln Franklin, MA	501	Power Platform Technology Specialist - Microsoft
5/9/24	Mark Sawyer 83 Pheasant Hill Rd Franklin, MA	257.94	
5/14/24	Mary Beth Fraser 119 Hillside Rd Franklin, MA	26.25	
5/14/24	Michael Videira 35 Marvin Ave Franklin, MA	100	
5/14/24	Republican Town Committee of Franklin	319	Republican Town Committee
5/26/24	Steven Henry 18 Midland Ave Franklin, MA	10.80	
Line 10: Total Receipts over \$50 (or listed above)		2,441.68	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 11: Total Receipts \$50 and under (not listed above)			
Line 12: TOTAL RECEIPTS IN THE PERIOD		2,441.68	← Enter on page 1, line 2



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 6/4/24 Ending Date: 7/11/24

Type of Report: (Check one)

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

Candidate Full Name (if applicable): _____

Office Sought and District: _____

Residential Address: _____

E-mail: _____

Phone #: _____

*TOWN OF FRANKLIN
TOWN CLERK
2024 JUL 11 P 3:49
RECEIVED*

voteNOfranklin Ballot Question Committee

Committee Name

Michael Videira

Name of Committee Treasurer

35 Marvin Ave Franklin, MA 02038

Committee Mailing Address

E-mail: votenofranklin@gmail.com

Phone #: 401-368-9266

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>893.80</u>
Line 2: Total receipts this period (page 3, line 12)	<u>375</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,268.80</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>1,142.21</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>126.59</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Rockland Trust</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: _____ (Treasurer's signature) Date: 7/11/24

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: _____

1068

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
06/05/24	Daniel McCarthy	100	
06/07/24	David B. Redonnet	150	
06/06/24	Francis J. Cummings Jr.	25	
06/02/24	Paul Flynn	100	

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
6/26/24	Local Business First	1216 Sage Pine Circle, Clover, SC 29710	Website	228
06/14/24	Local Town Pages	74 Main Street Suite 16, Medway, MA 02053	Newspaper Ad	605
Various	Paypal	Paypal.com	credit card fees	3.38
06/06/24	Practical Image	763 Waverly St Framingham, MA	Yard Signs	158.84
06/12/24	Robodial.org, LLC	robodial.org	Robo calls	11
06/05/24	USPS	43 Main St. Franklin, MA	Stamps	136



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 7/12/24 Ending Date: 1/20/2025

Type of Report: (Check one)

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

Candidate Full Name (if applicable): _____

Office Sought and District: _____

Residential Address: _____

E-mail: _____

Phone #: _____

*TOWN OF FRANKLIN
TOWN CLERK
2025 JAN 21 12:01
RECEIVED*

voteNOfranklin Ballot Question Committee

Committee Name

Michael Videira

Name of Committee Treasurer

35 Marvin Ave Franklin, MA 02038

Committee Mailing Address

E-mail: votenofranklin@gmail.com

Phone #: 401-368-9266

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>126.59</u>
Line 2: Total receipts this period (page 3, line 12)	<u>101.99</u>
Line 3: Subtotal (line 1 plus line 2)	<u>228.58</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>3.93</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>224.65</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Rockland</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: _____ (Treasurer's signature) Date: 1/20/25

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: _____

1 of 8

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
06/05/24	Marie Foley 33 Longobardi Drive Franklin, MA	51.99	
06/10/24	Sterling Gardner 30 Arlington St Franklin, MA	50.00	



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

Fill in Reporting Period dates: Beginning Date: 1/21/2025 Ending Date: 2/13/25

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

Candidate Full Name (if applicable)
Office Sought and District
Residential Address
E-mail:
Phone #:

voteNOfranklin Ballot Question Committee
Committee Name
Michael Videira
Name of Committee Treasurer
35 Marvin Ave Franklin, MA 02038
Committee Mailing Address
E-mail: votenofranklin@gmail.com
Phone #: 401-368-9266

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>224.65</u>
Line 2: Total receipts this period (page 3, line 12)	<u>1.56</u>
Line 3: Subtotal (line 1 plus line 2)	<u>226.21</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>226.21</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Rockland</u>

2025 FEB 13 A 8:52
RECEIVED
TOWN OF FRANKLIN
TOWN CLERK

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) Date: 2/13/25

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 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 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 candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: _____ (Candidate's signature) Date: _____

1 of 8

