Form CPF M101: STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM

Commonwealth of Massachusetts

Office of Campaign and Political Finance
Fitchburg City Clerk

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:
Full Name: Edward Charles Rhone
Residential Address: 139 Mt. Vernon St.
City / State / Zip: Fitchburg, MA 01420
E-Mail Address: ecrhone@yahoo.com Phone #: 978-400-5485
Party Affiliation: (If applicable)

OFFICE SOUGHT/PURPOSE:
Title: School committee member
District: Fitchburg MA

COMMITTEE:
Name of Committee: Phone for Fitchburg School Committee
(Committee Mailing Address must include candidate's last name)
Committee Mailing Address: 139 Mt. Vernon St.
City / State / Zip: Fitchburg, MA 01420 Phone #: 978-400-5485

OFFICERS:
Chairman: David Thibault - Muñoz
Residential Address: 51 Longwood Ave.
City / State / Zip: Fitchburg, MA 01420 Phone #: 508-404-4365

Treasurer*: Paysha Rhone
Residential Address: 139 Mt. Vernon St.
City / State / Zip: Fitchburg, MA 01420 Phone #: 857-891-4483

*A public employee may not serve as treasurer of any political committee (see reverse).

Other Officer/Title: Residential Address:
City / State / Zip: Phone #:

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature Date: 10/30/15

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; 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; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature Date:

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature Date:
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.)

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Name and Residential Address (alphabetical listing required)</th>
<th>Amount</th>
<th>Occupation &amp; Employer (for contributions of $200 or more)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/9/15</td>
<td>Edward R. Stone 139 Mt. Vernon St. 60409</td>
<td>$88.06</td>
<td></td>
</tr>
</tbody>
</table>

Line 9: Total Receipts over $50 (or listed above) $88.06

Line 10: Total Receipts $50 and under* (not listed above) 

Line 11: TOTAL RECEIPTS IN THE PERIOD $88.06

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

← Enter on page 1, line 2

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

Fill in Reporting Period dates:  
Beginning Date: **11/1/2015**  
Ending Date: **10/10/2015**

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

**Edward Charles Rhone**  
Candidate Full Name (if applicable)

**School Committee Member**  
Office Sought and District

**Fitchburg**  
134 Mt. Vernon St. Fitchburg MA 01420  
Residential Address

Telephone Number (optional): **978-400-5485**

**Rhone for Fitchburg School Committee**  
Committee Name

**Paysha Rhone**  
Name of Committee Treasurer

**Fitchburg**  
134 Mt. Vernon St. Fitchburg MA 01420  
Committee Mailing Address

Telephone Number (optional): **857-891-4483**

**SUMMARY BALANCE INFORMATION:**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ending Balance from previous report</td>
<td><strong>0</strong></td>
</tr>
<tr>
<td>2</td>
<td>Total receipts this period (page 3, line 11)</td>
<td><strong>$88.06</strong></td>
</tr>
<tr>
<td>3</td>
<td>Subtotal (line 1 plus line 2)</td>
<td><strong>$88.06</strong></td>
</tr>
<tr>
<td>4</td>
<td>Total expenditures this period (page 5, line 14)</td>
<td><strong>$0</strong></td>
</tr>
<tr>
<td>5</td>
<td>Ending Balance (line 3 minus line 4)</td>
<td><strong>$88.06</strong></td>
</tr>
<tr>
<td>6</td>
<td>Total in-kind contributions this period (page 6)</td>
<td><strong>0</strong></td>
</tr>
<tr>
<td>7</td>
<td>Total (all) outstanding liabilities (page 7)</td>
<td><strong>0</strong></td>
</tr>
<tr>
<td>8</td>
<td>Name of bank(s) used:</td>
<td></td>
</tr>
</tbody>
</table>

**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:  
(Treasure's signature)  
Date:

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

☐ Candidate with Committee and no activity independent of the committee  
☐ 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 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:  
(Candidate's signature)  
Date:
Post date: 10/09/2015
Amount: -88.06
Type: Debit card
Purchaser: EDWARD C RHONE
Description: Staples, Inc 10/09 #000565626 PURCHASE
Staples, Inc LEOMINSTER MA
Merchant category: Stationery, Office, and School Supply Stores
Merchant category code: 5943
Expense category: Miscellaneous Stores