



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance **CITY CLERK
FALL RIVER, MA**

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/23 Ending Date: 10/20/23

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

Michelle Larrivee
Candidate Full Name (if applicable)
Fall River School Committee
Office Sought and District
268 Oak Grove Ave., Fall River, MA 02723
Residential Address
E-mail: larrivee33@gmail.com
Phone # (optional): _____

Committee to Elect Michelle "Mimi" Larrivee
Committee Name
Peter Daley
Name of Committee Treasurer
268 Oak Grove Ave., Fall River, MA 02723
Committee Mailing Address
E-mail: peterbdaley@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1,288.42</u>
Line 2: Total receipts this period (page 3, line 11)	<u>4,765.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>6,053.42</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1,410.48</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$4,642.94</u>
Line 6: Total in-kind contributions this period (page 6)	_____
Line 7: Total (all) outstanding liabilities (page 7)	_____
Line 8: Name of bank(s) used:	<u>Bristol County Savings Bank</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: Peter Daley (Treasurer's signature) Date: 10/29/23

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: 10/29/23

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)
7/30/23	Jay Alexander 13054 NW Gilsin Road PALM CITY, FL 34990	\$500-	Self-employed Restaurateur
7/30/23	Rebecca and James Cusick 1528 Highland Ave. Fall River, MA 02720	\$80-	
7/30/23	Dr. Armand and Paula Desmarais 454 Mount Pleasant St. Fall River, MA 02720	\$280-	University of Massachusetts Instructor/Professor
7/30/23	Kimberly DeSoto 64 Louise Dr. Tirerton, RI 02878	\$80-	
7/30/23	Edward Keyes, Jr. 80 Bluff Ave. Swansea, MA 02777	\$80-	
7/30/23	Charlene and Thomas Khoury 477 Sherman St. Fall River, MA 02723	\$50-	
7/30/23	Michael Larrivee 75 Larrivee Pl. Fall River, MA 02724	\$360-	Maintenance Fall River Public Schools
7/30/23	Brian and Emily Martins 691 Elm St. Somerset, MA 02726	\$120-	
7/30/23	Sally and Mark Massa 25 Freetown St. Lakeville, MA 02347	\$160-	
7/30/23	Shelly McCann 29 Applecreek Ln. Fall River, MA 02720	\$80-	
7/30/23	John Mitchell 31d Florence St. Fall River, MA 02720	\$100-	
7/30/23	Kenneth Pacheco 265 Hyacinth St. Fall River, MA 02720	\$200-	Chief Operations Officer Fall River Public Schools
Line 9: Total Receipts over \$50 (or listed above)		\$3,170-	
Line 10: Total Receipts \$50 and under* (not listed above)		\$1,595-	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$4,765-	← 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

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)
7/30/23	Gerald Patvin 32 Berlin St. Fall River, MA 02720	\$200 -	Retired
7/30/23	Gerald Patvin 32 Berlin St. Fall River, MA 02720	\$120	
7/30/23	Christine and Andrew Reilly 27 Norfolk Rd Randolph, MA 02368	\$80	
7/30/23	Sen. Michael Rodrigues 14 Mason St Westport, MA 02790	\$100	
7/30/23	Jared Santos 371 Sherman St Fall River, MA 02723	\$80 -	
7/30/23	Sheri & Justin Santos 499 Chicago St Fall River, MA 02721	\$80 -	
7/30/23	Rep Alan Silvia 684 Woodman St Fall River, MA 02724	\$80	
7/30/23	Michael and Melissa St Pierre 377 Quincy St Fall River, MA 02720	\$100 -	
7/30/23	Naomi and Terrance Sullivan 1010 High St Fall River, MA 02720	\$1240	Retired
Line 9: Total Receipts over \$50 (or listed above)		\$3,170 -	
Line 10: Total Receipts \$50 and under* (not listed above)		\$1,595 -	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$4,765 -	← 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
4/1/23	Rep. Carole Fiola	307 Archer St. Fall River, MA 02720	2 tickets to campaign fundraiser	\$70-
7/13/23	Kahuna's Kids	1875 Bay St. Fall River, MA 02724	Sponsorship of fundraiser	\$300-
1/30/23	Michelle Larrivee	268 Oak Grove Ave. Fall River, MA 02723	reimbursement for Viveiros School sci. project	\$75.62
7/9/23	Michelle Larrivee	268 Oak Grove Ave. Fall River, MA 02723	reimbursement for supplies for campaign fundraiser	\$75.37
10/9/23	Michelle Larrivee	268 Oak Grove Ave. Fall River, MA 02723	reimbursement for purchase of shredder	\$49.49
3/12/23	People Incorporated	4 S. Main St. Fall River, MA 02721	Tee Sponsor of golf tourn. held on 9/13/22	\$200-
9/28/23	People Incorporated	4 S. Main St. Fall River, MA 02721	Tee Sponsor of golf tourn held on 9/12/23	\$200-
9/28/23	RE Creation	45 Rock St. Fall River, MA 02720	Sponsorship of golf tournament	\$250-
8/26/23	Rep. Alan Silvia	684 Woodman St. Fall River, MA 02724	2 tickets to campaign fundraiser	\$70-
8/17/23	Laura Washington	410 Joseph Dr. Fall River, MA 02720	tickets to campaign fundraiser	\$120-
Line 12: Total Expenditures over \$50 (or listed above)				\$1,410.48
Line 13: Total Expenditures \$50 and under* (not listed above)				-
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$1,410.48

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.