



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 07/17/2017 Ending Date: 08/25/2017

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

Joshua Erich Hetzler  
Candidate Full Name (if applicable)  
School Committee, Fall River, MA  
Office Sought and District  
1441 Stafford Rd., Fall River, MA 02721  
Residential Address  
E-mail: JOSHUAHETZLER@GMAIL.COM  
Phone # (optional): 7745264699

Committee to Elect Joshua Hetzler  
Committee Name  
Ronald E. Gagne  
Name of Committee Treasurer  
525 Fuller St., Fall River, MA 02721  
Committee Mailing Address  
E-mail: COMMITTEETOSELECTHETZLER@GMAIL.COM  
Phone # (optional): 5084932467

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$0.00
Line 2: Total receipts this period (page 3, line 11)	\$5650.00
Line 3: Subtotal (line 1 plus line 2)	\$5650.00
Line 4: Total expenditures this period (page 5, line 14)	\$3345.38
Line 5: Ending Balance (line 3 minus line 4)	\$2304.62
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$4000.00
Line 8: Name of bank(s) used:	Bank Five

#### 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: Ronald E. Gagne (Treasurer's signature) Date: 8/30/17

#### 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: Joshua Erich Hetzler (Candidate's signature) Date: 8/30/17

## 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)
08/22/2017	Arruda, Janelle C. 472 Highland Ave. Westport, MA 02790	\$50	
08/24/2017	Berube, Paul 492 Bullock St. Fall River, MA 02720	\$50	
08/23/2017	Butterfield, Kimberly 155 Duffy Dr. Taunton, MA 02780	\$100	
08/24/2017	Couture, Annette 51 Raymond St. Fall River, MA 02723	\$50	
08/23/2017	Dutra, Leonard R. 67 School Brook Rd. Fall River, MA 02720	\$50	
08/24/2017	Ferreira, Megan 310 Neptune St. Fall River, MA 02721	\$50	
08/24/2017	Gagne, Denise 525 Fuller St. Fall River, MA	\$200	Retired
08/23/2017	Gana, Sheldon J. 1279 Wilbur Ave. Swansea, MA 02777	\$100	
08/25/2017	Hetzler, Daniel H. 535 Hyacinth St. Fall River, MA 02720	\$100	
08/25/2017	Hetzler, Jo Ann 535 Hyacinth St. Fall River, MA 02720	\$100	
07/25/2017	Hetzler, Joshua E. 1441 Stafford Rd. Fall River, MA 02721	\$2000	Firefighter City of Fall River, MA
08/15/2017	Hetzler, Joshua E. 1441 Stafford Rd. Fall River, MA 02721	\$1000	Firefighter City of Fall River, MA
Line 9: Total Receipts over \$50 (or listed above)		-----	
Line 10: Total Receipts \$50 and under* (not listed above)		-----	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		-----	← 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 (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
08/21/2017	Hetxler, Joshua E. 1441 Stafford R. Fall River, MA 02721	\$1000	Firefighter City of Fall River, MA
08/23/2017	Lapointe, John P. 386 Freelove St. Fall River, MA 02720	\$100	
08/24/2017	Morales, Bethany 535 Hyacinth St. Fall River, MA 02720	\$50	
08/23/2017	Nelson, Curtis W. 558 Valentine St. Fall River, MA 02720	\$50	
08/24/2017	Peterson, Dora 46 Sunset Dr. Somerset, Ma	\$50	
08/24/2017	Peterson, Eric 46 Sunset Dr. Somerset, MA 02726	\$50	
08/25/2017	Placido, Connie 284 Meridian St. Fall River, MA 02720	\$100	
08/22/2017	Saber, Pamela Almeida 2758 Highland Ave. Fall River, MA 02720	\$100	
08/21/2017	Schachne, Jay S. 6 Pierce Ct. Barrington, RI 02806	\$200	Physician SouthCoast
08/24/2017	Silva, Liberal 158 Plain St. Fall River, MA 02723	\$50	
08/24/2017	Torres, John 37 Davis St. Fall River, MA 02720	\$50	
Line 9: Total Receipts over \$50 (or listed above)		\$5100	
Line 10: Total Receipts \$50 and under* (not listed above)		\$550	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		\$5650	← 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
07/26/2017	Cambridge Offset Printing	822 Eastern Ave. Fall River, MA 02723	200 campaign signs 200 campaign bumper stickers	\$1351.50
07/31/2017	Cambridge Offset Printing	822 Eastern Ave. Fall River, MA 02723	250 campaign lapel stickers	\$143.44
08/23/2017	Cambridge Offset Printing	822 Eastern Ave. Fall River, MA 02723	150 campaign signs	\$1159.19
08/23/2017	Express Printing	102 County St. Fall River, MA 02723	2,000 campaign postcards	\$143.44
08/21/2017	Local Blast	99 South Main St. Fall River, MA 02721	Social Media/Marketing	\$500.00
Line 12: Total Expenditures over \$50 (or listed above)				\$3297.57
Line 13: Total Expenditures \$50 and under* (not listed above)				47.81
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>\$3345.38</b>

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





## SCHEDULE D: LIABILITIES

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
07/25/2017	Joshua E. Hetzler	1441 Stafford Rd. Fall River, MA 02721	overall campaign expenses	\$2000
08/15/2017	Joshua E. Hetzler	1441 Stafford Rd. Fall River, MA 02721	overall campaign expenses	\$1000
08/21/2017	Joshua E. Hetzler	1441 Stafford Rd. Fall River, MA 02721	overall campaign expenses	\$1000
Enter on page 1, line 7 →			<b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>	<b>\$4000</b>