

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED

Office Use Only

2012 FEB 29 PM 12:50

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

CITIZENS FOR PAUL HERoux

ADDRESS (number and street)

11 DAILEY Street

Attleboro

Check if different than previously reported. (ACC)

MA

02703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00508994

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D

2011

through

M M / D D

12 31 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Rebecca Katz

Signature of Treasurer

X *Rebecca Katz*

Date

M M / D D / Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

12030751091

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Report Covering the Period: From:

M M / D D / Y Y Y Y

To:

M M / D D / Y Y Y Y

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

10,050.²⁵₀₀

10,050.²⁵₀₀

(b) Total Contribution Refunds
(from Line 20(d))

0

0

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

10,050.²⁵₀₀

10,050.²⁵₀₀

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

10,000.00

10,000.00

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

10,000.00

10,000.00

8. Cash on Hand at Close of
Reporting Period (from Line 27)

50.²⁵₀₀

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

12030751092

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From: MM / DD / YYYY 2011 To: MM / DD / YYYY 12 / 31 / 2011

12030751093

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------------|-------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 10,050. ²⁵ ₀₀ | 10,050. ²⁵ ₀₀ |
| (ii) Unitemized..... | | |
| (iii) TOTAL of contributions from individuals..... | 10,050. ²⁵ ₀₀ | 10,050. ²⁵ ₀₀ |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 0 | 0 |
| (d) The Candidate..... | 0 | 0 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 10,050. ²⁵ ₀₀ | 10,050. ²⁵ ₀₀ |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..... | | |
| | 0 | 0 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) All Other Loans..... | 0 | 0 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0 | 0 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..... | | |
| | 0 | 0 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | | |
| | 0 | 0 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 10,050. ²⁵ ₀₀ | 10,050. ²⁵ ₀₀ |

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:
(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans.....
(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:
(a) Individuals/Persons Other
Than Political Committees.....

(b) Political Party Committees.....
(c) Other Political Committees
(such as PACs).....

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS.....

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ▶

10,000.00

10,000.00

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

10,000.00

10,000.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

New Committee

0

25

10,050.00

25

10,050.00

10,000.00

25

50.00

12030751094

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

| | | | | |
|--------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial)
Heroux-Camira, Lauren

Mailing Address
140 Rocklawn Ave.

City State Zip Code
Attleboro MA 02703

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
County Square Pharmacist

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)
 \$2,500.00

Date of Receipt
M M ' D D ' Y Y Y Y
12 ' 25 ' 20 11

Amount of Each Receipt this Period
/ one

B. Full Name (Last, First, Middle Initial)
Heroux, Robert

Mailing Address
29 Buxus Shore

City State Zip Code
Sandwich MA 02563

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
County Square Pharmacist

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)
 2500.00
~~25000.00~~

Date of Receipt
M M ' D D ' Y Y Y Y
12 ' 25 ' 20 11

Amount of Each Receipt this Period
/ one

C. Full Name (Last, First, Middle Initial)
Henning, Jeff

Mailing Address
1 Evergreen Valley

City State Zip Code
Dover NH 03820

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Graham Corporation Engineer

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)
 2,500.00
~~25000.00~~

Date of Receipt
M M ' D D ' Y Y Y Y
12 ' 25 ' 20 11

Amount of Each Receipt this Period
/ one

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12030751095

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

| | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) Stanley, Jacquelyn

Mailing Address 175 Union Street

City Attleboro State MA Zip Code 02703

FEC ID number of contributing federal political committee. C

Name of Employer Plainville Prescription Occupation Pharmacist

Receipt For: Primary General Other (specify)

Election Cycle-to-Date \$ 2500.00

Date of Receipt 12/25/2011

Amount of Each Receipt this Period 1

B. Full Name (Last, First, Middle Initial) Rebeca Katz

Mailing Address 11 Bailey St Attleboro MA

City Attleboro State MA Zip Code 02703

FEC ID number of contributing federal political committee. C \$ 50.00

Name of Employer Blackstone Prop ch. school Occupation Teacher

Receipt For: Primary General Other (specify)

Election Cycle-to-Date \$ 50.00

Date of Receipt 12/12/2011

Amount of Each Receipt this Period 1

C. Full Name (Last, First, Middle Initial) PayPal

Mailing Address www.paypal.com

City Attleboro State MA Zip Code 02703

FEC ID number of contributing federal political committee. C

Name of Employer PayPal Occupation Teacher

Receipt For: Primary General Other (specify)

Election Cycle-to-Date \$.25

Date of Receipt 12/30/2011

Amount of Each Receipt this Period 1

SUBTOTAL of Receipts This Page (optional) \$ 10,050.00

TOTAL This Period (last page this line number only) 25

12030751096

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

17 18 19a 19b
 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A.

weebly web pages, Inc.

Date of Disbursement

M M / D D / Y Y Y Y
2011

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement *Establishment of web page*

Candidate Name *Paul Heroux*

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

B.

Sowyrda Kevin

Date of Disbursement

M M / D D / Y Y Y Y
12 22 2011

Mailing Address

9 Bartemus Trail Nashua NH 03063

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement *Media Consulting Services/Campaign Manager*

Candidate Name *Paul Heroux*

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

\$ 10,000.00

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)

\$ 10,000.00

TOTAL This Period (last page this line number only)

12030751097

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) Paul Heroux

LOAN SOURCE Full Name (Last, First, Middle Initial)
NO LOANS this reporting period

Mailing Address

City State ZIP Code

Election:
 Primary
 General
 Other (specify) ▼

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

TERMS

Date Incurred Date Due Interest Rate Secured:

M M / D D / Y Y Y Y M M / D D / Y Y Y Y % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional) 0

TOTALS This Period (last page in this line only) 0

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030751098

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

| | |
|---|---------------------------------------|
| NAME OF COMMITTEE (In Full) Paul Heroux | FEC IDENTIFICATION NUMBER C |
|---|---------------------------------------|

| | | |
|---|------------------------------|--------------------------|
| LENDING INSTITUTION (LENDER) Full Name | Amount of Loan | Interest Rate (APR) % |
| Mailing Address | Date Incurred or Established | |
| City State Zip Code | Date Due | |

No Loans of Lines of Credit this report.

12030751099

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: _____ Total Outstanding Balance: _____

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: _____

Location of account: _____

Address: _____

City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

| | |
|---|-----------------------------|
| G. COMMITTEE TREASURER Typed Name Signature | DATE M M / D D / Y Y Y Y |
|---|-----------------------------|

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

| | |
|--|-----------------------------|
| AUTHORIZED REPRESENTATIVE Typed Name Signature | DATE M M / D D / Y Y Y Y |
|--|-----------------------------|

No Loans of Lines of Credit

FECA

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

| | | |
|---|--------------------------------------|----------------------------|
| (Use separate schedule(s) for each numbered line) | PAGE | OF |
| | FOR LINE NUMBER: (check only one) | <input type="checkbox"/> 9 |

12030751100

NAME OF COMMITTEE (In Full) Paul Heroux

| | | |
|--|-----------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): <u>No Debts / Obligations</u> |
| Mailing Address | | |
| City | State Zip Code | |
| Outstanding Balance Beginning This Period | Amount Incurred This Period | |
| | Payment This Period | Outstanding Balance at Close of This Period |

| | | |
|--|-----------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City | State Zip Code | |
| Outstanding Balance Beginning This Period | Amount Incurred This Period | |
| | Payment This Period | Outstanding Balance at Close of This Period |

| | | |
|--|-----------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City | State Zip Code | |
| Outstanding Balance Beginning This Period | Amount Incurred This Period | |
| | Payment This Period | Outstanding Balance at Close of This Period |

| | |
|---|---|
| 1) SUBTOTALS This Period This Page (optional) | ▶ |
| 2) TOTALS This Period (last page this line number only) | ▶ |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | ▶ |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ |

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

| | | | | | |
|--|---|--|--|--|---|
| Name of Principal Campaign Committee (In Full) <i>Citizens for Paul Heroux</i> | | Report Covering Period: From: <i>2011</i> | | To: <i>12 31 2011</i> | |
| Committee Name <i>Citizens For Paul Heroux</i> | | | | (a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees | (b) Line No. 11(b) Total Contributions From Political Party Committees |
| A | | | | | |
| B Column Total Last Page Only..... <i>0</i> | | | | | |
| (c) Line No. 11(c) Total Contributions From Other Political Committees | (d) Line No. 11(d) Total Contributions From The Candidate | (e) Line No. 11(e) Total Contributions | (f) Line No. 12 Total Transfers From Other Authorized Committees | (g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate | (h) Line No. 13(b) Total All Other Loans |
| A <i>0</i> | A <i>0</i> | A <i>\$10,050</i> | A <i>0</i> | A <i>0</i> | A <i>0</i> |
| B | | | | | |
| (i) Line No. 13(c) Total Loans | (j) Line No. 14 Total Offsets to Operating Expenditures | (k) Line No. 15 Total Other Receipts | (l) Line No. 16 Total Receipts | (m) Line No. 17 Total Operating Expenditures | (n) Line No. 18 Total Transfers to Other Authorized Committees |
| A <i>0</i> | A <i>0</i> | A <i>0</i> | A <i>\$10,050.25</i> | A <i>\$10,000.00</i> | A <i>0</i> |
| B | | | | | |
| (o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate | (p) Line No. 19(b) Total Loan Repayments of All Other Loans | (q) Line No. 19(c) Total Loan Repayments | (r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons | (s) Line No. 20(b) Total Contribution Refunds to Political Party Committees | (t) Line No. 20(c) Total Contribution Refunds to Other Political Committees |
| A <i>0</i> | A <i>0</i> | A <i>0</i> | A <i>0</i> | A <i>0</i> | A <i>0</i> |
| B | | | | | |
| (u) Line No. 20(d) Total Contribution Refunds | (v) Line No. 21 Total Other Disbursements | (w) Line No. 22 Total Disbursements | (x) Line No. 23 Cash on Hand Beginning of Reporting Period | (y) Line No. 27 Cash on Hand Close of Reporting Period | (z) Line No. 9 Debts & Obligations Owed TO the Committee |
| A <i>0</i> | A <i>0</i> | A <i>\$10,000.00</i> | A <i>0</i> | A <i>\$50.25</i> | A <i>0</i> |
| B | | | | | |
| (aa) Line No. 10 Debts & Obligations Owed BY the Committee | (bb) Line No. 6(c) Net Contributions | (cc) Line No. 7(c) Net Operating Expenditures | | | |
| A <i>0</i> | A <i>\$10,050.25</i> | A <i>\$10,000.00</i> | | | |
| B | | | | | |

12030751101

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *fed Ex* Shipping Date
2/28/12
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature] *2/29/12*
 PREPARER DATE PREPARED

12030751102