



**State of Rhode Island and Providence Plantations**  
**Board of Elections**  
 Campaign Finance Unit  
 50 Branch Avenue, Providence, Rhode Island 02904  
 Telephone No. (401) 222-2345  
 www.elections.ri.gov

**RECEIVED**  
 1-16-18  
 4:20pm

**SUMMARY OF BALLOT QUESTION ADVOCACY ACTIVITY (BQA-1)**

Office Time Stamp

Full Name of Ballot Question Advocate

*Stacy Louise Vezina - Wortman*

Other Name(s) Under Which Ballot Question Advocacy Conducted

*Andrew David Wortman*

Street Address

*9 AZALEA COURT*

City/Town, State and Zip Code

*Scituate, RI 02825*

Mailing Address (if different)

*Same*

City/Town, State and Zip Code

Telephone Number

*401 632 3197*

Daytime Telephone Number

Fax Number

E-mail Address

*drew.stacywortman@gmail.com*

Name(s) and Address(es) of Endorsing or Member Organizations of This Ballot Question Advocate that have authorized the Ballot Question Advocate to use their name in support of their efforts: (Attach additional list if necessary)

Name  
*Scituate Police Dept*

Address  
*116 Main St, Hope, RI 02831*

The Question Whose Approval or Rejection the Ballot Question Advocate Intends to Advocate

Ballot Question: *please see attached*

Approval  Rejection

**Summary of Activity for Reporting Period (see reverse for instructions)**

Reporting Period Beginning Date: *12/15/17*

Original Report

Reporting Period Ending Date: *1/16/18*

Amended Report

Beginning Fund Balance: \$ *25.00*

Plus: Total Amount Contributed This Period: \$ *4285.00*

Minus: Total Amount Expended This Period: (\$ *842.40*)

Ending Fund Balance: \$ *472.60*

In-Kind Contributions This Period: \$ \_\_\_\_\_

Pursuant to R.I.G.L. 17-25.2-5(a)(1): The Name, Address and, if applicable, the Place of Employment of every person making a contribution(s) that in the aggregate exceed \$1,800 per election cycle to a ballot question advocate for the purpose of ballot question advocacy must be identified.

See attached "Schedule of Contributions For Ballot Advocacy" (Form BQA-2) for Identified Contributions.

Pursuant to R.I.G.L. 17-25.2-5(a)(2): The Name and Address of every person or entity receiving an expenditure for ballot question advocacy, which in the aggregate exceeds \$100, must be identified.

See attached "Schedule of Expenditures For Ballot Advocacy" (Form BQA-3) for Identified Expenditures.

I hereby certify that this report of contributions and expenditures and the supporting documents are complete, true and correct and that I am responsible for its contents and for the ballot question advocate's compliance with the provisions of R.I.G.L. 17-25.2.

*Stacy L. Vezina - Wortman*  
 Print Name of Person Completing Report/Officer of the Ballot Question Advocate

Title of Person Completing Report/Officer of the Ballot Question Advocate

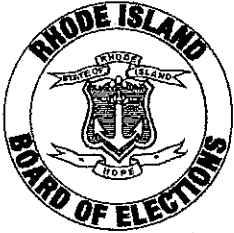
*9 Azalea Court Scituate RI*  
 Address of Person Completing Report/Officer of the Ballot Question Advocate

*Stacy Vezina Wortman* *1/16/18*  
 Signature of Person Completing Report or An Officer of the Ballot Question Advocate Date

Authorizing Town of Scituate to generate obligation bonds to finance a new police Station.

Shall the Town of Scituate be authorized to issue bonds in an amount not to exceed 1.7 million for the aquisition of any real estate, if needed, construction, furnishings & equiping of new police station and all cost of incedentals there to; the terms, details and conditions of such bonds and expenditure of proceeds there of to be established and approved by resolution of the Town Council.

Please see reverse side for instructions on how to complete this form.



State of Rhode Island and Providence Plantations

Board of Elections

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SCHEDULE OF CONTRIBUTIONS FOR BALLOT ADVOCACY (BQA-2)

Time Stamp (For Office Use Only)

Full Name of Ballot Question Advocate

Stacy Louise Vezina Wortman

Reporting Period Beginning Date: 12/15/17

Original Report

Reporting Period Ending Date: 1/16/18

Amended Report

Table with 4 columns: NAME AND ADDRESS OF CONTRIBUTOR, PLACE OF EMPLOYMENT OF CONTRIBUTOR, IF INDIVIDUAL, DATE CONTRIBUTION RECEIVED, AMOUNT OF CONTRIBUTION. The table is currently empty with a diagonal line drawn across it.

List all contributors on this page who have a direct or indirect affiliation with any entity or person that operates or owns any type or kind of gambling facility or entity in any jurisdiction and, if so, the name of such facility or entity.

Contributor Name

Gambling Facility or Entity Name

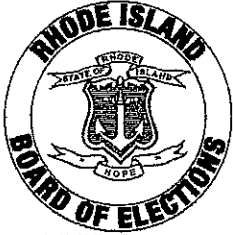
Blank lines for entering Contributor Name

Blank lines for entering Gambling Facility or Entity Name

PAGE NO: \_\_\_ OF \_\_\_

PAGE TOTAL \$

Please see reverse side for instructions on how to complete this form.



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SCHEDULE OF EXPENDITURES FOR BALLOT ADVOCACY (BQA-3)

Time Stamp
(For Office Use Only)

Full Name of Ballot Question Advocate

Stacy Louise Vezina Wortman

Reporting Period Beginning Date: 12/15/17

Reporting Period Ending Date: 1/16/18

Original Report
Amended Report

Table with 4 columns: NAME AND ADDRESS OF PERSON TO WHOM EXPENDITURE WAS MADE, PURPOSE OF EXPENDITURE, DATE EXPENDITURE MADE, AMOUNT OF EXPENDITURE. Row 1: Eramian Signs, 140 Shon Pike, Johnston, RI; Printed yard signs; 1/5/18; 800.00