



Town of Bourne
Interdepartmental Advisory Form



Start Date:	4/8/2022
Owner/Applicant:	Buzzards Bay Aerie 3741 Fraternal Order of Eagles Donna McCormack 73 Fearing Hill road, West Wareham, MA 02576 [REDACTED]
Project Location:	39 Cohasset Avenue, Buzzards Bay, MA 02532
Nature of Request:	Year Round Club License for the Sale of All Alcoholic Beverages Change of Manager Change of Officers/Directors Alteration of Premise to include outside seating
Liability Insurance Naming Town of Bourne as Additional Insured	Has applicant provided insurance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Map:	23.2	Parcel:	87.00	District:	
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☐ **Engineering:**

Date of Recording:		Lot Area:		Frontage:		Zone:	DTC
Resource District:	No	Town Road:	Yes	Paved:	Yes	Contiguous Lots:	No
Flood Zone:	AE 16'	Within 100' of Wetland:	No				

Owner:
Remarks:

4/11/2022 Timothy P Lydon
Date Department Head

☐ **Planning Department/Planning Board:** ☒ **Concurs** ☐ **Does Not Concur**

Remarks: Special permit
#07-2022 currently under
review.

4/22/2022 Jennifer Copeland
Date Town Planner

☐ **Conservation Commission:** ☐ **Must File** ☐ **Determination** ☐ **Notice of Intent**
 ☒ **Need not File**

Remarks:

4/22/2022 Stephanie Fitch
Date Conservation Agent

☐ Board of Health: ☒ Concur ☐ Does Not Concur

Remarks: Pending inspection results on 5/17/2022

5/9/2022 K.Shea
Date Health Agent

☐ Building Inspector: ☒ Concur ☐ Does Not Concur

Remarks:

4/14/2022 KMurphy/ag
Date Building Inspector

☐ Sewer Commissioners: ☒ Approved ☐ Disapproved ☐ Not Under Sewer Jurisdiction

Remarks:

4/11/2022 Maria Simone/Admin
Date Department Head

☐ Town Collector: ☐ Outstanding Taxes ☒ Taxes Paid In Full

FY	RE	\$0.00	FY	RE	\$0.00	FY	RE	\$0.00
FY	RE	\$0.00	FY	RE	\$0.00	FY	RE	\$0.00
FY	RE	\$0.00	FY	RE	\$0.00	FY	RE	\$0.00

Remarks:

4/25/2022 Shelly R Murphy
Date Town Collector

☐ Town Clerk:
If not corporation has business certificate been issued? ☐ Yes ☐ No

Remarks: N/A

4/20/2022 M Fernandes
Date Clerk's Office

☐ Assessors:
This individual has (have) completed the Form of List? ☒ Yes ☐ No

Remarks: ON FILE

4/25/2022 J Potter
Date Assessors Office

☐ Department of Public Works: ☐ Approved ☐ Disapproved ☒ Not Under DPW Jurisdiction

Remarks:

4/26/2022

Matthew Quinn

Date

Department Head

☐ Department of Natural Resources: ☐ Approved ☐ Disapproved ☒ Not Under DNR Jurisdiction

Remarks:

4/8/2022

Chris Southwood

Date

Department Head

☐ Recreation Department: ☐ Concur ☐ Does Not Concur ☒ Not Under Jurisdiction

Remarks:

4/11/2022

Krissanne M. Caron

Date

Department Head

☐ Police Department: ☒ Concur ☐ Does Not Concur ☐ Not Under Police Jurisdiction

Remarks:

4/11/2022

Lt. John R. Stowe

Date

Department Head

☐ Fire Department: ☒ Concur ☐ Does Not Concur

Remarks:

4/8/2022

David S. Pelonzi, Assistant Chief

Date

Department Head

☐ Town Administrator/Board of Selectmen: ☐ Concur ☐ Does Not Concur

Remarks:

Date

Town Administrator/Board of Selectmen Chairman



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/10/21

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

United Insurance Agency, Inc.
199 Main Street
P.O. Box 1013
Buzzards Bay, MA 02532

CONTACT

NAME:

PHONE (A/C, No, Ext): 508-759-6595

FAX (A/C, No): 508-759-3822

E-MAIL:

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: USLI

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

REVISION NUMBER:

COVERAGES

CERTIFICATE NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		NPP1563887G	11/17/21	11/17/22	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
		MED EXP (Any one person) \$ 5,000				
		PERSONAL & ADV INJURY \$ 1,000,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOG					PRODUCTS - COMP/OP AGG \$ 2,000,000
	OTHER:					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY				PROPERTY DAMAGE (Per accident) \$
						\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
	DED	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N				PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> N/A				OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT \$
						E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$
A	Liquor Liability		NPP1563887G	11/17/21	11/17/22	Occurrence \$ 1,000,000
						Aggregate \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Fraternal Club
Location: 30 Cohasset Ave, Bourne Ma

CERTIFICATE HOLDER

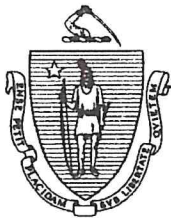
CANCELLATION

Town of Bourne
24 Perry Ave.
Buzzards Bay, Ma 02532-3441

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Kris Dexter



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

☐

CHANGE OF LOCATION

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
Alteration of Premises/Change of Location Application
Vote of the Entity Board
Supporting financial records
Legal Right to Occupy
Floor Plan
Abutter's Notification*
Advertisement*

☒

ALTERATION OF PREMISES

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
Alteration of Premises/Change of Location Application
Vote of the Entity Board
Supporting financial records
Legal Right to Occupy
Floor Plan
Abutter's Notification*
Advertisement*

☐

MANAGEMENT AGREEMENT

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
Management Agreement Application
Management Agreement
Vote of the Entity Board
CORI Forms for all listed in Section 8A and attachments

IMPORTANT NOTE: A management agreement is where a licensee authorizes a third party to control the daily operations of the license premises, while retaining ultimate control over the license, through a written contract. *This does not pertain to a liquor license manager that is employed directly by the entity.*



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

Non-Profit Club's ONLY

e.g. Veteran's Club

☒ **Non-Profit Club CHANGE OF OFFICERS/DIRECTORS**

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Officers/Directors Application

☒ Vote of the club signed by an approved officer

Business Structure Documents-Articles of Organization from the Secretary of the Commonwealth

CORI Authorization Form This form **must** be *notarized with a stamp or raised seal*.

Monetary Transmittal Form

\$200 fee via [ABCC website](http://www.abcc.mass.gov) and Payment Receipt

☒ **Non-Profit Club CHANGE OF MANAGER**

\$200 fee via [ABCC website](http://www.abcc.mass.gov) and Payment Receipt

Monetary Transmittal Form

Change of Manager Application

☒ Vote of the club signed by an approved officer

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Updated Officers and Directors*

*Please ensure to update your officers and directors **simultaneously** or **PRIOR** to applying for a change of manager. It will be returned with no action taken if the officers and directors do not match ABCC records.

Proof of Citizenship. Passport, birth certificate, voter registration, or naturalization papers will be accepted.



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

**RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
MONETARY TRANSMITTAL FORM**

APPLICATION FOR MULTIPLE AMENDMENTS

**APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL
LICENSING AUTHORITY.**

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

**PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE
PAYMENT RECEIPT**

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00012-CL-0118

ENTITY/ LICENSEE NAME

Buzzards Bay Aerie 3741, Fraternal Order of Eagles Inc.

ADDRESS

PO Box 355 39 Cohasset Ave

CITY/TOWN

Buzzards Bay

STATE

MA

ZIP CODE

02532

For the following transactions (Check all that apply):

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input checked="" type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input checked="" type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | <input type="checkbox"/> Other | | <input type="checkbox"/> Change of DBA |

**THE LOCAL LICENSING AUTHORITY MUST MAIL THIS
TRANSMITTAL FORM ALONG WITH
COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:**

Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

1. BUSINESS ENTITY INFORMATION

Entity Name

Municipality

ABCC License Number

Buzzards Bay Aerie 3741 Fraternal Order of Eagles

Town of Bourne

00012-CL-0118

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

We are applying for an amendment for Alteration to Premises, Change in Manager and Update Officer/Director list due to changes in our Not For Profit organization.

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name

Title

Email

Phone

Donna McCormack

Past Worthy President

2. AMENDMENT-Change of License Classification

☐ **Change of License Category**

All Alcohol, Wine and Malt,
Wine Malt and Cordials

Last-Approved License Category

Requested New License Category

☐ **Change of License Class**

Seasonal or Annual

Last-Approved License Class

Requested New License Class

☐ **Change of License Type***

i.e. Restaurant to Club

*Certain License Types

CANNOT change once issued*

Last-Approved License Type

Requested New License Type

3. AMENDMENT-Change of Business Entity Information

☐ **Change of Corporate Name**

Last-Approved Corporate Name:

Requested New Corporate Name:

☐ **Change of DBA**

Last-Approved DBA:

Requested New DBA:

☐ **Change of Corporate Structure**

LLC, Corporation, Sole

Proprietor, etc

Last-Approved Corporate Structure

Requested New Corporate Structure

4. AMENDMENT-Pledge Information

☐ **Pledge of License**

To whom is the pledge being made:

☐ **Pledge of Inventory**

☐ **Pledge of Stock**

5. AMENDMENT-Change of Manager☒ **Change of License Manager****A. MANAGER INFORMATION**

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth SSN Residential Address West Wareham, MA 02576Email Phone Please indicate how many hours per week you intend to be on the licensed premises Last-Approved License Manager **B. CITIZENSHIP/BACKGROUND INFORMATION**

Are you a U.S. Citizen?*

☒ Yes ☐ No *Manager must be a U.S. Citizen

If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime?

☐ Yes ☒ No

If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name

D. PRIOR DISCIPLINARY ACTIONHave you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? ☐ Yes ☒ No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature Date

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

☒ **Change of Officers/Directors** ☐ **Change of Ownership Interest (LLC Managers/LLP Partners, Trustees)** ☐ **Change of Stock (E.g. New Stockholder/ Transfer or Issuance of Stock)**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form. X
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises (Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.

NON Profit Corp.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal

KRISTINE M CAUBLE

Title and or Position

PRESIDENT

Name of Principal

JAMES MCCORMACK

Title and or Position

VICE PRESIDENT

Name of Principal

MEGHAN MCCARTHY

Title and or Position

DIRECTOR

Name of Principal

ROSEMARIE A PADDEN-DRISCOLL

Title and or Position

TREASURER

Name of Principal

MEGHAN MCCARTHY

Title and or Position

CLERK

Name of Principal

Title and or Position

Percentage of Ownership

Director/ LLC Manager US Citizen

☐ Yes ☐ No

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Additional pages attached?

☐ Yes ☒ No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☒ No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement?

Please provide a copy of the management agreement.

☐ Yes ☒ No

ADDENDUM A

6. Change of Officers, Stock or Ownership Interest (Continued...)

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name

Percentage of Ownership in Entity being Licensed

(Write "NA" if this is the entity being licensed)

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director/ LLC Manager

☐ Yes ☐ No

US Citizen

☐ Yes ☐ No

MA Resident

☐ Yes ☐ No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☐ No

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

6B. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
N/A		
Name of Principal	Title/Position	Percentage of Ownership
N/A		
Name of Principal	Title/Position	Percentage of Ownership
N/A		
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes ☐ No ☒ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes ☐ No ☒ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled?

Yes ☐ No ☒ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

7. AMENDMENT-Change of Premises Information

☐ **Alteration of Premises:** (must fill out attached financial information form)

7A. ALTERATION OF PREMISES

Please summarize the details of the alterations and highlight any specific changes from the last-approved premises.

We installed a fenced in area during the pandemic on our property. We would like to make a permanent change to our liquor license to include this outdoor enclosed area which is directly accesible from the inside the building

PROPOSED DESCRIPTION OF PREMISES

Please provide a complete description of the proposed premises, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

3600 sq ft building, one floor, five rooms and a cellar, 850 sq ft outside fenced in patio dining area with one entrance and 2 exits

Total Sq. Footage	4450	Seating Capacity	185	Occupancy Number	257
Number of Entrances	3	Number of Exits	5	Number of Floors	2

☐ **Change of Location:** (must fill out attached financial information form)

7B. CHANGE OF LOCATION

Last-Approved Street Address

Proposed Street Address

DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

Total Sq. Footage	<input type="text"/>	Seating Capacity	<input type="text"/>	Occupancy Number	<input type="text"/>
Number of Entrances	<input type="text"/>	Number of Exits	<input type="text"/>	Number of Floors	<input type="text"/>

OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises. (E.g. Deed, lease, letter of intent)

Please indicate by what means the applicant has to occupy the premises

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales?

☐ Yes ☐ No

8. AMENDMENT-Management Agreement

Management Agreement: (must fill out all pages in section 8)

Are you requesting approval to utilize a management company through a management agreement?
If yes, please fill out section 8.

☐ Yes ☐ No

Please provide a narrative overview of the Management Agreement. Attach additional pages, if necessary.

IMPORTANT NOTE: A management agreement is where a licensee authorizes a third party to control the daily operations of the license premises, while retaining ultimate control over the license, through a written contract. This does not pertain to a liquor license manager that is employed directly by the entity.

8A. MANAGEMENT ENTITY

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in the management Entity (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name

Address

Phone

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director

US Citizen

MA Resident

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director

US Citizen

MA Resident

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director

US Citizen

MA Resident

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

Name of Principal

Residential Address

SSN

DOB

Title and or Position

Percentage of Ownership

Director

US Citizen

MA Resident

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☐ No

8B. EXISTING MANAGEMENT AGREEMENTS AND INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 8A, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages; and or have an active management agreement with any other licensees?

Yes ☐ No ☐ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

8. AMENDMENT-Management Agreement

8C. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 8A, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held?

Yes ☐ No ☐ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

8D. PREVIOUSLY HELD MANAGEMENT AGREEMENT

Has any individual or entity identified in question 8A, and applicable attachments, ever held a management agreement with any other Massachusetts licensee?

Yes ☐ No ☐ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Licensee Name	License Type	Municipality	Date(s) of Agreement

8E. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 8B, 8C or 8D ever been suspended, revoked or cancelled?

Yes ☐ No ☐ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

8F. TERMS OF AGREEMENT

a. Does the agreement provide for termination by the licensee?

Yes ☐ No ☐

b. Will the licensee retain control of the business finances?

Yes ☐ No ☐

c. Does the management entity handle the payroll for the business?

Yes ☐ No ☐

d. Management Term Begin Date

e. Management Term End Date

f. How will the management company be compensated by the licensee? (check all that apply)

☐ \$ per month/year (indicate amount)

☐ % of alcohol sales (indicate percentage)

☐ % of overall sales (indicate percentage)

☐ other (please explain)

ABCC Licensee Officer/LLC Manager

Signature:

Title:

Date:

Management Agreement Entity Officer/LLC Manager

Signature:

Title:

Date:

9. FINANCIAL DISCLOSURE

Required for the following transactions:

- Change of Officers, Stock or Ownership Interest (E.g. New Stockholder/Transfer or Issuance of Stock)
- Change of Premises Information
- Pledge of License, Inventory or Stock

Purchase Price(s):

N/A

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
MEMBERS DONATED FENCE SECTIONS	
Total:	

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
N/A			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

There was no change to our physical building. We built a fenced in area abutting the side of our building. We did not need to secure financing from any institution. We had a fund raiser and our members donated the fence sections and other needed materials for this change to our premise. The work was done solely by volunteers. We have no employees. We are 100% volunteer based not for profit club.

APPLICANT'S STATEMENT

I, Samuel H. Crumack the: ☐ sole proprietor; ☐ partner; ☐ corporate principal; ☐ LLC/LLP manager
Authorized Signatory
of Fraternitas Order Eagles 3741 Buzzards Bay
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Samuel H. Crumack

Date:

Title:

Past Worthy President



Commonwealth of Massachusetts
Department of Revenue
Geoffrey E. Snyder, Commissioner

mass.gov/dor

Letter ID: L1109266112
Notice Date: March 9, 2022
Case ID: 0-001-437-424



CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



BUZZARDS BAY AERIE #3741 FRATERNA
39 COHASSET AVE
BUZZARDS BAY MA 02532-3210

Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, BUZZARDS BAY AERIE #3741 FRATERNAL ORDER OF EAGLES INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

What if I have questions?

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau

4/4/2022

RE: DUA Certificate of Compliance

From: revenue.enforcement@state.ma.us,

To: [REDACTED]

Subject: RE: DUA Certificate of Compliance

Date: Mon, Apr 4, 2022 11:44 am

Hi Donna- Please share the email below with the ABCC.

DUA has reviewed Buzzards Bay Aerie #3741 has never had any unemployment insurance tax obligations and is not required to register with DUA. Please allow this email to serve as a DUA certificate of compliance. DUA has no objection to this liquor license transaction.

Thank you,

Greg Faro- Revenue Enforcement

Department of Unemployment Assistance



ENTITY VOTE

The Board of Directors or LLC Managers of Buzzards Bay Gene 374 Fraternal Order of Eagles Inc
Entity Name

duly voted to apply to the Licensing Authority of Bourne and the
City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on 3/17/22
Date of Meeting

For the following transactions (Check all that apply):

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input checked="" type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input checked="" type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

"VOTED: To authorize

Donna McCormack

Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint

Donna McCormack

Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts.”

A true copy attest,

For Corporations ONLY

A true copy attest,

Kristina Cuhle

Corporate Officer /LLC Manager Signature

KRISTINE PAUBLE

(Print Name) PRESIDENT-2021-2022

Corporate Clerk's Signature

(Print Name)

Corporations Division

Business Entity Summary

ID Number: 310913830

[Request certificate](#)

[New search](#)

Summary for: BUZZARDS BAY AERIE NO. 3741 FRATERNAL ORDER OF EAGLES, INC.

The exact name of the Nonprofit Corporation: BUZZARDS BAY AERIE NO. 3741 FRATERNAL ORDER OF EAGLES, INC.

Entity type: Nonprofit Corporation

Identification Number: 310913830

Old ID Number: 000077623

Date of Organization in Massachusetts: 08-16-1978

Date of Revival: 7/29/2021 12:00:00 AM

Date of Revocation: 06-18-2012

Last date certain:

Current Fiscal Month/Day: 5 /31

Previous Fiscal Month/Day: 1 /01

The location of the Principal Office in Massachusetts:

Address: 39 COHASSET AVE P. O. BOX 365

City or town, State, Zip code, BUZZARDS BAY, MA 02532 USA

Country:

The name and address of the Resident Agent:

Name:

Address:

City or town, State, Zip code,

Country:

The Officers and Directors of the Corporation:

Title	Individual Name	Address	Term expires
PRESIDENT	KRISTINE M CAUBLE		2022
TREASURER	ROSEMARIE A PADDEN-DRISCOLL		2022
VICE PRESIDENT	JAMES MCCORMACK		2022
CLERK	MEGHAN M MCCARTHY		2022
DIRECTOR	MEGHAN M MCCARTHY		2022



Consent



Confidential
Data



Merger
Allowed



Manufacturing

Note: Additional information that is not available on this system is located in the Card File.

View filings for this business entity:

ALL FILINGS

Annual Report

Application For Revival

Articles of Amendment

Articles of Consolidation - Foreign and Domestic

Articles of Consolidation - Domestic and Foreign

[View filings](#)

Comments or notes associated with this business entity:

[New search](#)

April 13, 2022

To whom it may concern.

Buzzards Bay Eagles of 39 Cohasset Ave , Buzzard Bay Ma 02532 has a Commercial Mortgage with Rockland Trust Company that is in good standings .



Brendan Ahern

AVP/Branch Manager

NMLS # 530977

2420 Cranberry Hwy

West Wareham, MA 02571

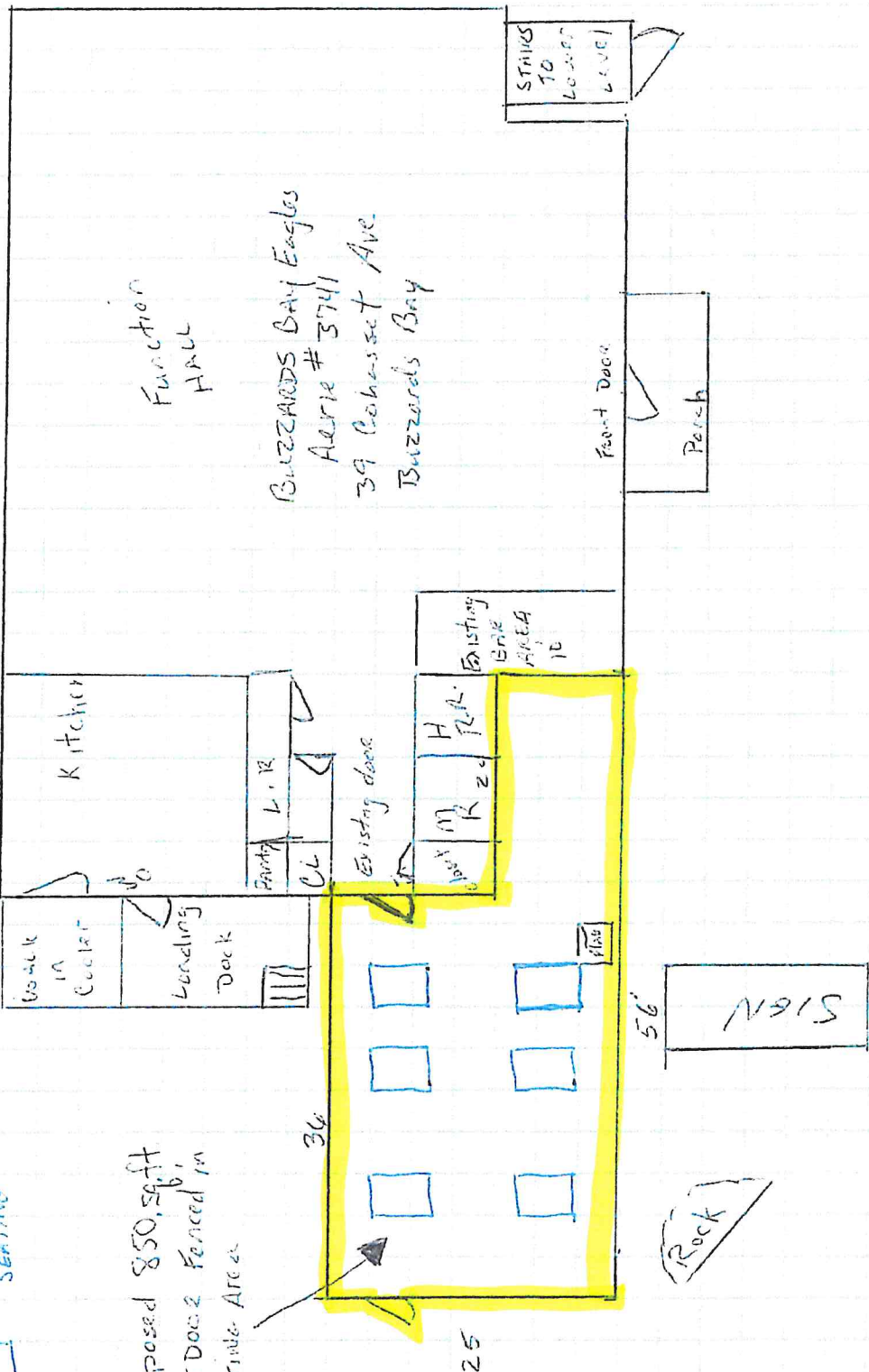
Tel 508-295-5271

Brendan.Ahern@Rocklandtrust.com



□ = TABLE SEATING

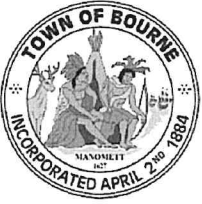
Proposed 850.59 ft² OUT DOOR FENCED IN SEATING AREA



Buzzards Bay Eagles
Area # 3741
39 Cohasset Ave
Buzzards Bay

COHASSET AVE

WALLACE AVE



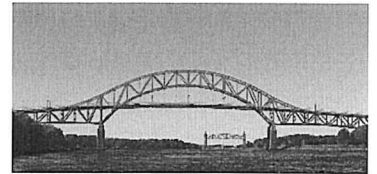
TOWN OF BOURNE

Board of Assessors

24 Perry Avenue

Buzzards Bay, MA 02532

(508) 759-0600 Ext. 1510 ♦ Fax (508) 759-8026



Michael Leitzel, Chairperson
Ellen Doyle Sullivan, Clerk
Donna Barakauskas, Member

Rui Pereira, MAA
Director of Assessing

April 13, 2022

Buzzards Bay Eagles Aerie 3741
39 Cohasset Ave.
Buzzards Bay, MA 02532

Reference: Abutters List for Map 23.2 Parcel 87
Subject Property: 39 Cohasset Ave.

Pursuant to the provisions of Massachusetts General Laws Chapter 138, Section 15A, as amended, this is to certify that the enclosed list of names and addresses constitutes all of the abutters of the premise, including schools, churches and hospitals within 500 feet of the subject property on the most recent tax list of the Town of Bourne. The purpose of the abutters list is for an application of a Liquor License from the Board of Selectmen.

Abutting properties are: Map 23.2 Parcels 55, 86, 90, 91, 94.01 & 102.

Your payment of \$10.00 has been received by the Assessor's Office.

Please be advised that this abutters list is only good for 30 days from the date on this letter. Expired abutters list can be recertified for an additional filing fee.

See enclosed Data Base Inquiry Forms for abutters mailing addresses.

Board of Assessors

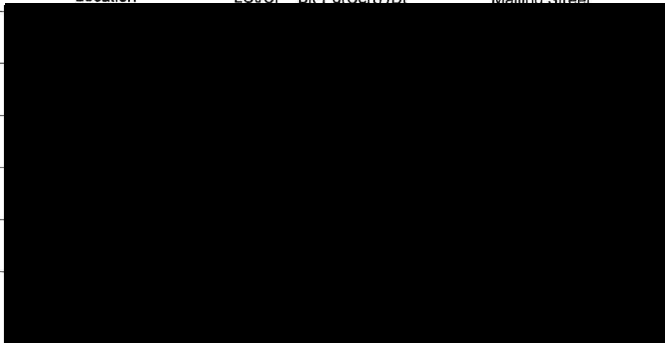
List Enclosed

*Ellen Doyle Sullivan -
Donna Barakauskas
Michael Leitzel*

Extract: 1 Abutters List
Database: LIVE
Filter: Key IN 4575,4606,4610,4611,4626,4616
Sort:

Report #24: Owner Listing Report
Fiscal Year 2023

Bourne MA

Key	Parcel ID	Owner	Location	LC/CI	Bk-Pol(Cert) /Dt	Mailing Street	Mailing City	ST	Zip Cd/County
4575	23.2-55-0	BUZZARDS BAY WATER DISTRICT CHASE PLAN REV 12/9/71					BUZZARDS BAY	MA	02532
4606	23.2-86-0	RYMSHA RICHARD M TR BOOBAY REALTY TRUST					SANDWICH	MA	02563
4610	23.2-90-0	SHARPBACK LLC					BOURNE	MA	02532
4611	23.2-91-0	12 WALLACE AVE LLC					BUZZARDS BAY	MA	02532
4616	23.2-94-1	ROMAN CATHOLIC BISHOP OF FALL RIVER CORP ST MARGARETS CHURCH					BUZZARDS BAY	MA	02532
4626	23.2-102-0	ST PETERS CHURCH ON THE CANAL INC					BUZZARDS BAY	MA	02532-3228
Total Records		6							

Obituaries

Marjorie L. Duffy

Marjorie L. Duffy, a longtime Bourne resident, died April 19. She was 84 and had been living in Georgia at the time of her death. She was the wife of John A. Duffy Sr., to whom she was married for 64 years.

The daughter of Joseph and Mary Gallant, she was born in West Newton.

Ms. Duffy raised a family and opened her home to many of her children's friends and made them feel welcome.

A woman of faith, she was a parishioner of St. Margaret's Church in Buzzards Bay for 48 years. More recently, Ms. Duffy worshipped at St. Vincent de Paul Roman Catholic Church in Dallas, Georgia.

In addition to her husband, she leaves her son, John A. Duffy Jr., and his wife, Wendy Duffy; her

daughter, Margie Souza; and three grandchildren.

She was preceded in death by her siblings, Richard Gallant and Mildred Duff.

A funeral service was celebrated Monday, April 25, at St. Vincent de Paul Church.

Interment was Wednesday, April 27, at Georgia National Cemetery.

James A. Fournier

James Albert Fournier of Dennis, formerly of Bourne and who leaves family in Sandwich, died April 5 at Massachusetts General Hospital in Boston. He was 72.

Son of the late Albert and Marjorie Fournier, he was born in Sagamore and lived on Cape Cod throughout his life.

He married his high school sweetheart and they had a son and a daughter together. While working as a mechanic in

Sandwich he met the woman who became his second wife, Sheryl A. McMahon. They were married for 28 of the 36 years they shared.

Mr. Fournier spent more than 40 years as a mechanic working on cars, trucks and motorcycles. He was a member of the Cape Cod Motorcycle Club for many years.

He also enjoyed participating in various bowling leagues as well as target shooting. For the past 20 years he was a member of the Discover Flying Club and had a passion for building and flying radio-controlled planes.

He leaves his children, Christopher J. Fournier of Elkhridge, Maryland, and Joanna J. Williams of Acushnet; four grandchildren; five brothers, Robert Fournier of Sandwich, Richard Fournier of Fort Pierce, Florida, David Fournier of Plymouth, Bryan Fournier of South

Yarmouth and Michael Fournier of Warham; a sister, Deborah Fournier of Fort Pierce, Florida; and extended family.

In addition to his parents, he was predeceased by a sister, Darlene Linnell.

Funeral services will be private.

Wayne E. Terrill

Wayne Eugene Terrill, 97, of Sagamore Beach died April 18 at Beth Israel Hospital-Plymouth.

He was the husband of Janice Elaine Terrill, to whom he was married for 78 years. Born and raised in Sioux City, Iowa, he was the son of Wayne Leroy Terrill and Vera Mae Walker.

After high school, he joined the United States Navy, Enlisting with the Seabees in Quonset Point, Rhode Island, he served overseas—in Newfoundland, France and Africa—during World War II. Following his military service, Mr. Terrill married and settled in Sagamore Beach.

He was a firefighter with the Bourne Fire Department for 38 years. After his retirement, he enjoyed working his own cranberry bog and gardening. In addition to his wife, he leaves a son, Glenn Ellis Terrill and his wife, Paula II. Terrill; a daughter, Susan Elaine Newell; five grandchildren; eight great-grandchildren; and a great-great-grandchild. He was preceded in death by his son Wayne Eugene Terrill Jr., who died in 1973.

A graveside service was Friday, April 22, at Bay View Cemetery in Sandwich.

Other Obituaries

The following residents, former residents or family of residents of Falmouth, Mashpee and Sandwich recently died. Visit capenews.net to read the complete obituary news stories.

John C. Cockerham, 74, of Raynham died April 22.

Robert J. Cota, 86, of East Falmouth died April 23.

Robert V. Crowley, 91, of Mashpee died April 14.

Brian A. Fornario, 40, of Marston Mills died April 14.

Judith C. Harper, 81, of Greenfield and Falmouth died November 22.

Dorothy M. Harris, 82, of Lakeville died April 7.

Karen J. Hutchins, 65, of East Falmouth died April 18.

Matthew C. Mitchell, 37, of Mashpee died April 2.

Linda S. Poire, 68, of Sandwich died April 22.

John J. Robinson, 60, of East Falmouth died April 18.

William F. Rogers, 82, of Sandwich died April 13.

Kenneth L. Ventura, 76, of Falmouth died April 20.

Barbara H. Webber, 95, of Mashpee died January 24.



COURTESY UPPER CAPE TECH
Upper Cape Tech students and staff donated items to Ukrainian citizens through the Interact Club.

UCT Students Donate Items To Ukraine

Students in the Upper Cape Cod Regional Technical School's Interact Club have completed a project to assist individuals in Ukraine. This schoolwide competition challenged students in vocational shops to collect items for donation. The shop that brought in the most items would earn an ice cream party.

Overall, UCT students collected more than 2,000 items, including medical supplies, bandages, food, clothing, toiletries, baby food and diapers to aid Ukrainian

citizens. The club is working with Ukraine Forward, an initiative of the Ukrainian American Educational Center of Boston, a 501(c)(3) organization.

Interact is a high school organization affiliated with Rotary International whose mission is for students to carry out hands-on service projects, make international connections, develop leadership skills, help people in need and have fun in the process.

The students sent the packages on Wednesday afternoon.

In Loving Memory

The following paid memorials have been submitted by the deceased's family and friends.

Margaret 'Maggie' McGarr

On April 26, 2022, Margaret "Maggie" McGarr of 6 Andrea Rd, Pocasset, MA passed away due to natural causes at Royal Meganest Nursing Home. She is survived by her four sons: Bill of San Diego, Michael of Pocasset, Jim of Hemet, CA, and David of Reno, NV. And her two grandchildren, Cara and Devin, also of Reno. She was born in East Hartford, CT on May 7, 1925. Her parents, Eugene and Caroline Sullivan and brothers Gene and Ed are deceased. Graduating from East Hartford H.S., she and

William "Bill" McGarr were married on Sept. 4, 1948 until his death Oct. 4, 1969. Maggie and Bill moved to Pocasset in August 1969. She worked for Aetna Inc., then secretary to the president of Plymouth/Bostonian Shoe Co., after raising her four sons. She then received her Real Estate license, and became office manager of Upper Cape Realty until retirement in 2005. She was a well-loved member of St. John the Evangelist Catholic Church and active in the Prayer Shawl Ministry, Alter Angels Ministry, Funeral Collation, St. John's

Bingo Family and St. John's Guild. Funeral Mass was held on Wed. May 4, 2022 at St. John the Evangelist Catholic Church, Pocasset, burial was held at St. Peter's Cemetery, Sandwich, and a celebration of her life followed at the parish center.

In lieu of flowers, donations should be made to St. John the Evangelist Catholic Church and/or St. Vincent de Paul Society.

Fond memories and expressions of sympathy may be shared at www.nickersonbourne.com for the McGarr family.

Julian F. Harwood

Julian F. Harwood, of Pocasset, MA passed away April 18, 2022 after a brief battle with lung cancer. Julian was born in Hampden, Maine in 1932 to the late Joseph and Miriam (Dewell) Harwood.

He joined the USMC in 1950. As his unit was traveling to California on a troop train to ship out to Korea, the train was hit head on by another train. He was among the injured, but more of the buddies in the unit were killed in the wreck than in Korea.

When he returned, he attended Bentley School of Accounting and Finance on the GI bill. He married his high school sweetheart, Lillian Tweer in 1953. Upon graduating from Bentley, he went to work for Computer Control Co. and was transferred to the West Coast office where he studied at UCLA. He

then returned to Boston, moved to Wellesley, bought a cottage in Pocasset and opened a Real Estate Office. He commuted to Boston and worked for Tech Companies, later becoming CFO of Continental Resources of Bedford and was a member of the regional board of Bay-Bank Middlesex. He lived for 33 years on Briarwood Lane. Julian served on the Bourne finance committee from 1966 to 1977 and was a member of the school building needs committee, and economic development. He ran twice unsuccessfully in the 90's for Selectman. After retiring he became a FEMA reserve and served in many disasters from Maine to California and the Virgin Islands.

He and his life were enthusiastic sportsmen. They skied all of New England, Mammoth and Yosemite in California and Alta, Utah. Julian was an avid sailor and sailed his Cheoy Lee Ketch in Buzzards Bay and the Islands. He enjoyed bare boat chartering on the coast of Maine, American and Brit-

ish Virgins, Lycian coast of Turkey as well as Tonga in the South Pacific. He enjoyed 27 winters golfing on Amelia Island, FL as well as Falcon Golf Course on Oahu. They joined the Cape Cod Curling Club and curied in Maine, Chicago, NH, RI, and Canada. He skipped a Men's team from the Cape Club to Hibbing, MN after winning the regional curl down. They joined a Swiss team and curied in Canada, Scotland, Germany, Italy, Paris, London, Prague and St. Petersburg, Russia. He enjoyed fly fishing in Canada, Montana and inside the Arctic Circle.

He was preceded in death by his brother Ron and Jon and sister Helen Norton. He is survived by his wife Lillian (Twee), his daughters Sibbhan Harwood and Leslie Romanuski, his grandchildren Kelley, Matthew, Austin & Danielle, his brother Robert, married and ished cousins, nieces and nephews.

Julian's final resting place is The Massachusetts National Cemetery adjacent to the Otis Angel. Funeral was private. A celebration of life will be planned for a later date.

Memorial contributions can be made to Wreaths Across America. Online guestbook can be found at www.casperfuneralservices.com

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For more information email Tamar Amaral tamar@capenews.net or call the Enterprise circulation number 508-299-8379.

MBL Falmouth FORUM

THE UNIVERSITY OF MASSACHUSETTS
MARINE BIOLOGICAL
LABORATORY

"Extreme Medicine: A New York Doctor Talks About 35+ Years in Ethiopia"

Friday, May 6



Rick Hodes, Medical Director
American Jewish Joint
Distribution Committee

7:30 PM
Cornelia Clapp Auditorium
7 MBL St. | Woods Hole

FREE ADMISSION

Presented in-person and virtually.

Visit mbl.edu/falmouth-forum

SUPPORTED BY:
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Bakalar Endowed Director's
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Cape Cod Foundation

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100 Teaticket Highway, East Falmouth

PUBLIC NOTICE OF ENVIRONMENTAL REVIEW

PROJECT: The proposed project includes plans of the existing clubhouse, utilize the existing shed for storage and remove a portion of one of the existing buildings to be converted into a covered open air patio with a drive station, 5 bath and outdoor kitchen area. Construct and maintain a new stone driveway, retaining walls, fence, and to utilize the existing Title 5 septic disposal system, which was installed in May 2002 and designed for a flow of 1,778 GPD, with the associated grading, utilities, mitigation, and landscaping. All proposed work is located further from Resource Areas than what previously exists and is within previously legally disturbed areas.

LOCATION: 56 Monmouth Road, Calverton, MA
PROPOSEN: Cape Cod Building, Inc.
The undersigned is submitting an Environmental Notification Form (ENF) to the Secretary of Energy & Environmental Affairs on or before April 28, 2022.

This will initiate review of the above project pursuant to the Massachusetts Environmental Policy Act (MPEA, M.G.L. c. 90, ss. 61-62L). Copies of the ENF may be obtained from:

NOTICE TOWN OF BOURNE LIQUOR HEARING

Notice is hereby given in accordance with Massachusetts General Laws Chapter 138, Section 12 that application has been received from Buzzards Bay Area #3741, Fraternal Order of Eagles, Inc. d/b/a Buzzards Bay Eagles, 39 Chatham Avenue, Buzzards Bay, MA, Matthew S. Gilbert, Manager, to amend his Year Round Club License for the sale of all kinds of Alcoholic Beverages to be drunk on the premises for a change of manager from Matthew S. Gilbert, Manager to Donna McCormack, a change in Officers/Directors and to include the addition of outside seating. Description of premises: 3600 sq. ft. building, one floor, five rooms and cellar, 850 sq. ft. entrance fenced in patio dining area with one entrance and 2 exits. A hearing will be held at the Bourne Veterans' Memorial Community Center, 239 Main Street, Buzzards Bay on Tuesday, May 1, 2022 at 7:05 p.m.

BOARD OF SELECTION
Peter J. Meier
Justin MacLeod Froman
George G. Slade, Jr.
Jared P. MacDonald
Mary Jane Mastrangelo

Very truly yours,
Marlene V. McColeum
Town Administrator

April 29, 2022



Lianne Carbone
Owner/MA HIS #192

Simply Hearing
Hearing aid center

SimplyHearing.net
508-548-8123

332 Gifford Street, Unit A
Falmouth, MA 02540

Facebook

NOTICE TOWN OF BOURNE LIQUOR HEARING

Notice is hereby given in accordance with Massachusetts General Laws Chapter 138, Section 12 that application has been received from Buzzards Bay Aerie #3741, Fraternal Order of Eagles, Inc. d/b/a Buzzards Bay Eagles, 39 Cohasset Avenue, Buzzards Bay, MA, Matthew S. Gilbert, Manager, to amend his Year Round Club License for the sale of all kinds of Alcoholic Beverages to be drunk on the premises for a change of manager from Matthew S. Gilbert, Manager to Donna McCormack, a change in Officers/Directors and to include the addition of outside seating. Description of premises: 3600 sq. ft. building, one floor, five rooms and cellar, 850 sq. ft. outside fenced in patio dining area with one entrance and 2 exits. A hearing will be held at the Bourne Veterans' Memorial Community Center, 239 Main Street, Buzzards Bay, on Tuesday, May 10, 2022 at 7:05 p.m.

BOARD OF SELECTMEN

Peter J. Meier

Judith MacLeod Froman

George G. Slade, Jr.

Jared P. MacDonald

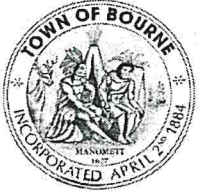
Mary Jane Mastrangelo

Very yours truly,

Marlene V. McCollem

Town Administrator

April 29, 2022



TOWN OF BOURNE

Board of Selectmen

Perry Avenue - Room 101
 Buzzards Bay, MA 02532-3496
 www.townofbourne.com



Phone: 508-759-0600 x1503
 Fax: 508-759-0420

APPLICATION FOR THE USE OF TOWN PROPERTY

Individual/Organization Bourne High School Unified Track Team

Address (mailing) 75 Waterhouse Rd
Bourne, MA 02532

Home/Business Address S. Blunt

Home Telephone # _____

Business Telephone # _____

Contact Person Suzy Blunt

Email address: _____

I (we) request the use of the following town owned property:

Name: Fire Station

Location: _____

Purpose: *** Car wash fundraiser for the BHS
Unified Track Team

Please indicate if a tent will be used or food served/available at event

Date(s) 5/14/22

Time(s)

From 9:00 (time first person will arrive)

To 12:30 (time last person will leave)

From _____ (time first person will arrive)

To _____ (time last person will leave)

*******Copy of Liability Insurance with town named as additional insured*******
 (PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM)

Approval is contingent upon your acceptance of the estimated costs as listed above. If for any reason, you no longer wish to use our facility, please contact us immediately.

From: [Blunt, Suzanne](#)
To: [Thut, Kathleen](#); [Simone, Maria](#)
Subject: Car wash fundraiser request for Unified Track Team
Date: Friday, May 6, 2022 3:12:57 PM

Hi Kathleen and Maria--

I know that I am supposed to attend the Board of Selectmen's meeting on May 10. However, it has occurred to me that I will be at a sectional track meet that day and may not get home until the early evening. I may miss the selectmen's meeting.

We are hoping to do the car wash as a fundraiser for the Unified Track team. This team is comprised of students with special needs and students without special needs (though it's been tough to find kids that have had the time to participate). It's a great program as it gives special needs students the opportunity to work together as a team, to compete for their personal best in track events and to proudly wear team gear as they represent Bourne High School. We hope to raise some funds to allow for an end of year celebration and to hopefully buy the students some purple and white tshirts/ sweatshirts representing their participation on the team.

I am not sure if I should try to email the Bourne Selectmen to state my case. Please let me know what you think I should do to get approval for this fundraiser.

Thanks for all your help!!

Suzy Blunt





Town of Bourne
Interdepartmental Advisory Form



Start Date:	5/5/2022
Owner/Applicant:	BHS Unified Track Team 75 Waterhouse Rd Suzy Blunt sblunt@bourneps.org
Project Location:	Buzzards Bay Fire House
Nature of Request:	5/14 9am-12:30p Car wash to raise funds for the team
Liability Insurance Naming Town of Bourne as Additional Insured	Has applicant provided insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No

Map:	23.2	Parcel:	177	District:	
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☐ **Engineering:**

Date of Recording:		Lot Area:		Frontage:		Zone:	DTC
Resource District:	No	Town Road:	Yes	Paved:	Yes	Contiguous Lots:	No
Flood Zone:	AE 16'	Within 100' of Wetland:					

Owner:

Remarks:

5/6/2022

Date

Timothy P Lydon

Department Head

☐ **Planning Department/Planning Board:** ☒ **Concurs** ☐ **Does Not Concur**

Remarks:

5/5/2022

Date

J. Copeland/ts

Town Planner

☐ **Conservation Commission:** ☐ **Must File** ☐ **Determination** ☐ **Notice of Intent**
☒ **Need not File**

Remarks:

5/6/2022

Date

Stephanie M Fitch

Conservation Agent

☐ **Board of Health:** ☒ **Concurs** ☐ **Does Not Concur**

Remarks:

5/9/2022

K.Shea

Date

Health Agent

☐ Building Inspector: ☒ Concur ☐ Does Not Concur

Remarks:

5/6/2022

Ken Murphy

Date

Building Inspector

☐ Sewer Commissioners: ☐ Approved ☐ Disapproved ☒ Not Under Sewer Jurisdiction

Remarks:

5/5/2022

Maria Simone/Admin

Date

Department Head

☐ Town Collector: ☐ Outstanding Taxes ☒ Taxes Paid In Full

FY	RE	\$0.00	FY	RE	\$0.00	FY	RE	\$0.00
FY	RE	\$0.00	FY	RE	\$0.00	FY	RE	\$0.00
FY	RE	\$0.00	FY	RE	\$0.00	FY	RE	\$0.00

Remarks:

5/6/2022

A Dastous

Date

Town Collector

☐ Town Clerk:
If not corporation has business certificate been issued? ☐ Yes ☐ No

Remarks: Not Applicable

5/5/2022

CCobb

Date

Clerk's Office

☐ Assessors:
This individual has (have) completed the Form of List? ☐ Yes ☐ No

Remarks: NA

5/6/2022

J Potter

Date

Assessors Office

☐ Department of Public Works: ☒ Approved ☐ Disapproved ☐ Not Under DPW Jurisdiction

Remarks:

5/6/2022
Date

Matthew Quinn
Department Head

☐ Department of Natural Resources: ☐ Approved ☐ Disapproved ☒ Not Under DNR Jurisdiction

Remarks:

5/5/2022
Date

Chris Southwood
Department Head

☐ Recreation Department: ☐ Concur ☐ Does Not Concur ☒ Not Under Jurisdiction

Remarks:

5/6/2022
Date

Krissanne M. Caron
Department Head

☐ Police Department: ☒ Concur ☐ Does Not Concur ☐ Not Under Police Jurisdiction

Remarks:

5/5/2022
Date

Lt. John R. Stowe Jr.
Department Head

☐ Fire Department: ☒ Concur ☐ Does Not Concur

Remarks:

5/5/2022
Date

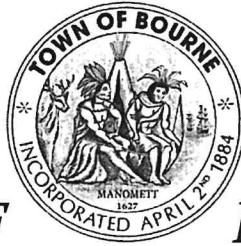
David S. Pelonzi, Assistant Chief
Department Head

☐ Town Administrator/Board of Selectmen: ☐ Concur ☐ Does Not Concur

Remarks:

Date

Town Administrator/Board of Selectmen Chairman



TOWN OF BOURNE
Office of the Town Clerk

MEMORANDUM

To: Members of the Board of Selectmen

From: Barry H. Johnson, Town Clerk

BHJ

Date: May 6, 2022

Subject: Request to Appoint Election Workers for the May 17, 2022 Annual Town Election

Attached to this memorandum is a list persons whom I respectfully requesting be appointed by the Board as Election Workers for the May 17, 2022 Annual Town Election.

Also, please be advised that we are still in the process of confirming additional persons to be appointed. Once completed, I will give the list to Town Administrator McCollem for presentment to the Board on Tuesday, May 10, 2022.

Thank You for your consideration of my request. If you have any comments or questions regarding this matter, please contact me at your earliest convenience.

c.c, Town Administrator Marlene McCollem

attachment: list of recommended persons for appointment

COMM	APPT BY	FIRST	LAST	STREET	CITY	ST	ZIP
Election Worker	Board of Selectmen	John F.	Adams	PO Box 992 - 28 Spurr Road	Pocasset	MA	02559
Election Worker	Board of Selectmen	Beverly	Arbo	PO Box 123 6 Pleasure Point Road	Sagamore	MA	02561
Election Worker	Board of Selectmen	Beverly	Armando	74 Deseret Drive	Bourne	MA	02532
Election Worker	Board of Selectmen	Sandra C.	Aronson	PO Box 606 - 15 Garfield Avenue	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Donna	Barakaukas	E2 Beach Plum Lane	Bourne	MA	02532
Election Worker	Board of Selectmen	Helen	Blankenship	14 Eel Pond Road	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Loretta	Brochu	7 Sir Lancelot Drive	Bourne	MA	02532
Election Worker	Board of Selectmen	Debra	Bryant	225 Head of the Bay Rd	Bourne	MA	02532
Election Worker	Board of Selectmen	Phillip	Burgess	Box 133 - 1051 Shore Road	Pocasset	MA	02559
		Mary Frances	Butler Lappin				
Election Worker	Board of Selectmen	Andrew G.	Campbell	13 Bell Road	Bourne	MA	02532
Election Worker	Board of Selectmen	Eda	Cardoza	16 Wright Lane	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Phyllis	Carpenito	1 Howard Avenue	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Barbara S.	Cavanagh	4 Anne Lane	Bourne	MA	02532

Election Worker	Board of Selectmen	Dolores	Collins	20 Sycamore Avenue	Sagamore Beach	MA	02562
Election Worker	Board of Selectmen	Anne	Dastous	3 Cote Circle	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Gary H.	Dayton	17 Settlers Way	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Kathy E.	Doherty	1D Beach Plum Lane	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Priscilla Cook	Dunlavy	26 Lincoln Avenue	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Maureen	Dunn	14 Wright Lane	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	M. Elizabeth	Ellis	50 Pleasant Street	Sagamore	MA	02561
Election Worker	Board of Selectmen	Mary E.	Ellis	20 Cotuit Road	Bourne	MA	02532
		Bernadette	Ericson				
Election Worker	Board of Selectmen	Jeanne M	Finley	11 Blue Meadow Ct	Bourne	MA	02532-8343
Election Worker	Board of Selectmen	Jan	Finton	PO Box 139	Pocasset	MA	02559
Election Worker	Board of Selectmen	Kristine B.	Fisher	PO Box 607 - 207 Scraggy Neck Road	Cataumet	MA	02534
Election Worker	Board of Selectmen	Diane	Flynn	PO Box 57	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Kathy A.	Fritzell	2639 Cranberry Highway	Wareham	MA	02571
Election Worker	Board of Selectmen	Ellen M.	Gately	108 Valley Bars Road	Bourne	MA	02532

Election Worker	Board of Selectmen	Mary Ann	Gavin	PO Box 396 - 10 Sun Circle	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Barbara	Gill	PO Box 634, 33 Beach Street	Monument Beach	MA	02553
		Darshan	Goux				
Election Worker	Board of Selectmen	Eileen P.	Grady	5 Lewis Point Way - Box 775	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Ann	Gutterson	9 Sandwich Road	Bourne	MA	02532
		Talley	Hargrave				
Election Worker	Board of Selectmen	Wandra L.	Harmsen	8 Colonial Road	Bourne	MA	02532-5549
Election Worker	Board of Selectmen	John W.	Harmsen	8 Colonial Road	Bourne	MA	02532-5549
		Diane	Hartley				
Election Worker	Board of Selectmen	Lillian T.	Harwood	PO Box 306 - 9 Harwood Dr.	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Jane	Heckler	24 Brookside Road	Bourne	MA	02532
Election Worker	Board of Selectmen	Beverly L.	Higgins	8 Fairway Circle	Bourne	MA	02559
Election Worker	Board of Selectmen	Jeanne E.	Hurley	8 Blue Meadow Ct.	Bourne	MA	02532
Election Worker	Board of Selectmen	Marie C.	Kane	405 Barlows Landing Road	Pocasset	MA	02559
Election Worker	Board of Selectmen	Mary Ellen	Kempton	18 Sea Knoll Ct	Bourne	MA	02532-8322
Election Worker	Board of Selectmen	Walter	Kliche	3 Carl Gardner Road	Bourne	MA	02532
Election Worker	Board of Selectmen	Frances M.	Lahteine	8 Freeman Street	Bourne	MA	02532

Election Worker	Board of Selectmen	Neil F.	Langille	14 Wright Lane	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Martin	Laspada	PO Box 1746 - 38 Lathrop Rd.	Sagamore Beach	MA	02562
Election Worker	Board of Selectmen	Ellen Grace	Lewis	15 Alona Avenue	Bourne	MA	02532
Election Worker	Board of Selectmen	Sheila E.	Mattson	2 Catherine Lane	Pocasset	MA	02559
Election Worker	Board of Selectmen	Judith	McAlister	26 Pequot Avenue	Pocasset	MA	02559
Election Worker	Board of Selectmen	Paula	McConnell	4 Colony Avenue	Buzzards Bay	MA	02532
		Jim	McGoldrick				
Election Worker	Board of Selectmen	Christine Anne	McManus	PO Box 776 - 946 Shore Road	Pocasset	MA	02559
Election Worker	Board of Selectmen	Linda M.	McManus-Masson	10 Tucs Avenue	Bourne	MA	02532-5549
Election Worker	Board of Selectmen	Susan H.	Moeck	35 Harbor Drive	Bourne	MA	02559
Election Worker	Board of Selectmen	Penny	Myers	PO Box 388 - 50 Pocahontas Road	Pocasset	MA	02559
Election Worker	Board of Selectmen	Shirley L.	Natoli	PO Box 392 - 10 Carver Road	Sagamore Beach	MA	02562
Election Worker	Board of Selectmen	John	O'Brien	PO Box 1034 - 3 Oak Ridge Drive	Pocasset	MA	02559
Election Worker	Board of Selectmen	Douglas	Oesterheld	PO Box 616 - 355 County Road	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Ruth	Palo	25 Maple Street	Buzzards Bay	MA	02532

Election Worker	Board of Selectmen	Mary	Reid	4 Easting Road	Bourne	MA	02532
Election Worker	Board of Selectmen	Mavis	Robinson	PO Box 33	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Barbara A.	Sabulis	PO Box 445 - 32 Regency Drive	Bourne	MA	02532
Election Worker	Board of Selectmen	Pauline E.	Sampson	85 County Road	Bourne	MA	02532
		Cathy	Sampson				
Election Worker	Board of Selectmen	Patricia	Saniuk	218 Main St	Buzzards Bay	MA	2532
		Steve	Schrader				
Election Worker	Board of Selectmen	Frank A.	Scofield	PO Box 77 - 2 Sherry Lane	Monument Beach	MA	02553
Election Worker	Board of Selectmen	Barbara J.	Scott	8 Ocean Pines Drive	Bourne	MA	02562
Election Worker	Board of Selectmen	Karen	Seiden	PO Box 112 - 1 Oakwood Drive	Sagamore Beach	MA	02562
Election Worker	Board of Selectmen	Dorothy K.	Shepard	PO Box 474 - 90 Barlows Landing Rd.	Pocasset	MA	02559-0474
Election Worker	Board of Selectmen	Edwin M.	Smith	50 Cranberry Road	Buzzards Bay	MA	02532
Election Worker	Board of Selectmen	Mary-Ellen	Split	24 Turnberry Road	Bourne	MA	02532
		Tammy	Staiger				
		Carol	Stearns				
Election Worker	Board of Selectmen	Vivian R.	Stowe	168 Shore Road	Bourne	MA	02532
Election Worker	Board of Selectmen	Vickie L.	Taylor	PO Box 1043	Pocasset	MA	02559

Election Worker	Board of Selectmen	Judith	Thrasher	338 Shore Road	Monument Beach MA	02553
Election Worker	Board of Selectmen	Cathy	Tibbetts	85 Cotuit Road G05	Bourne MA	02532
Election Worker	Board of Selectmen	Carole G.	Valeri	RFD#1, 360 Shore Road	Buzzards Bay MA	02532
Election Worker	Board of Selectmen	Patricia	Wahlberg	PO Box 157 - 6 Whimbrel Drive	Cataumet MA	02534
Election Worker	Board of Selectmen	Susan	Ward	23 Heritage Drive	Bourne MA	02532
Election Worker	Board of Selectmen	Merrilynn A.	Wenzel	11 Rip Van Winkle	Buzzards Bay MA	02532
Election Worker	Board of Selectmen	Marcia L.	Willmott	49 County Road	Bourne MA	02532
Election Worker	Board of Selectmen	Lorraine S.	Young	10 Harwood Drive	Pocasset MA	02559

**Board of Selectmen
Minutes of Monday, March 2, 2022
Bourne High School – Library**

TA Marlene McCollem

Board of Selectmen

Peter Meier, Chair
George Slade, Clerk
Judy Froman, Vice Chair

Others: Kathleen Thut, minutes.

6:15 PM Call Public Session to Order in Open Session

1. No public comment.

2a. Discussion and possible vote on Jennifer Kennedy's request to hold a 4th of July parade on Main St., Buzzards Bay on 7/4/22.

Jennifer Kennedy provided a written statement requesting permission for various tasks related to the 4th of July parade. Ms. Froman mentioned future succession planning for this large event could be assigned to various committees in the Town.

Voted: Judy Froman moved, and George Slade seconded to allow Jennifer Kennedy to organize and hold a 4th of July parade on 7/4/22.

Vote: 3-0-0.

2b. Discussion and possible vote to allow the Bourne Girls Lacrosse Boosters to hold a car wash at the Pocasset Fire Station on 5/15/22.

Voted: Judy Froman moved, and George Slade seconded to allow the Bourne Girls Lacrosse Boosters to hold a car wash at the Pocasset Fire Station on 5/15/22.

Vote: 3-0-0.

2c.. Discussion and possible vote to allow the Massachusetts Down Syndrome Congress to hold an event at Buzzards Bay Park on 5/14/22.

Voted: Judy Froman moved, and George Slade seconded to allow the Massachusetts Down Syndrome Congress to hold an event at Buzzards Bay Park on 5/14/22.

Vote: 3-0-0.

The meeting was adjourned at ~6:45 PM.

Respectfully Submitted,

Kathleen Thut, Administration