

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Worcester City Clerk

File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 10/31/33 Ending Date: 01/22/20
Type of Report: (Check one)
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution
Nelly Medina Committee to Elect Velly Medina
Candidate Full Name (if applicable) Workester 5(hool Committee - District E) Office Sought and District Committee Name Wan of Committee Treasurer
34 Lakeside Ave. AA+3, Worleyter MA 01603 Residential Address Committee Mailing Address Committee Mailing Address
E-mail: Madinagarcia 2022 @ gmail. com E-mail: bmulhearn @ Worcester. edu
Phone #: Phone #:
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
Line 2: Total receipts this period (page 3, line 12)
Line 3: Subtotal (line 1 plus line 2)
Line 4: Total expenditures this period (page 5, line 15)
Line 5: Ending Balance (line 3 minus line 4)
Line 6: Total in-kind contributions this period (page 6, line 18)
Line 7: Total (all) outstanding liabilities (page 7, line 19)
Line 8: Total out-of-pocket expenses this period (page 8, line 22)
Line 9: Name of bank(s) used:
Affidavit of Committee Treasurer:
certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Drum Mulhoum (Treasurer's signature) Date: 01/22/21
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
signed under the penalties of perjury: Tuly Medina (Candidate's signature) Date: 1/22/2024

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

	Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)			
11/02/23	Adelante Worcester PAC F.O. Box 85, Danielson, CT 06239	₹5 00	Politica Action Committee			
11/02/23	Michael Agbortoko 18 Avalon St, Revere, MA 02151	\$100				

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	ž.		
Line 10: Total Rece	ipts over \$50 (or listed above)	\$ 600	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11
	pts \$50 and under (not listed above)	#0	should include only those receipts not itemized above.
Line 12: TOTAL R	ECEIPTS IN THE PERIOD	1600	← Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/20/20	Brian Mulhearn	18 Wyola Prive Worceyer, MA 01603	treasurer + communications	1300
11/07/23	(harley's (heesetteans	1241 Mainst. Worcester, MA 01603	food for Volunteers	1/39.12
11/07/23	Dankin'	1283 Main St. Worcester, MA 01603	Coffee for volunteers	133,29
12/10/23	Print Source	122 Weatherstone Dr. Worlester, MA 01604	Palm Cards	#365,31
11/03/23	frivy Tees	37 Fair haven Ad. Worcester, MA 01606	Signs	b)160
11/07/23	Wicked Wing co.	321 W Boylston St. Workester, MA 01606	Food for results party	#194,77

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
		<u> </u>		
		1		
				/
:				
			<u> </u>	
and under, inc	itemized expenditures of \$50 clude them in line 13. Line 14	Line 13: Expenditures over \$50	(or listed above)	\$ 1091.83
should includ	le only those expenditures not itemized above.	Line 14: Expenditures \$50 and	under (not listed above)	127.64
	Enter on page 1, line 4 →	Line 15: TOTAL EXPENDIT	URES IN THE PERIOD	12219.47

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a-page number on each additional pages.

cruae ine canavane	or committee name and a-page number or	each adainoidh page.		
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
]				
İ				
* If you have . \$50 and under,	itemized in-kind contributions of include them in line 16. Line 17	Line 16: In-Kind Contributions ove	er \$50 (or listed above)	\$10
should inclu	de only those expenditures not itemized above.	Line 17: In-Kind Contributions \$50	and under (not listed above)	\$10
	Enter on page 1, line 6 →	Line 18: TOTAL IN-KIND CONT	RIBUTIONS IN THE PERIOD	#0

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
		3		
	Enter on page 1, line 7 →	Line 19: TOTAL OUTSTAND	DING LIABILITIES (ALL)	10

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
11/20/23	Afollo Lwarga 12 Albert 5t, Workester, MA 01602	\$400	graphic design and video editing
Line 20: Total Itemize (or listed above)	d Out-Of-Pocket Expenditures Over \$50	1400	* If you have out-of-pocket expenses of \$50
	nized Out-Of-Pocket Expenditures \$50 and e)	10	and under, include them in line 20. Line 21 should include only those expenditures not itemized above.
Line 22: TOTAL OUT-0	OF-POCKET EXPENDITURES IN THE PERIOD	1400	← Enter on page 1, line 8



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 09/29/2023 Ending Date: 11/30/2023
Type of Report: (Check one)
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution
Nelly Medina Candidate Full Name (if applicable) Wor certer School Committee Melmber - E Office Sought and District Name of Committee Treasurer Name of Committee Treasurer Name of Committee Treasurer Name of Committee Treasurer Null Lakevide Ave, APth, Wollettu MAO 2607 Residential Address E-mail: Madinagaria 2022 Agmail: (and Phone # (optional): Phone # (optional):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2) 92911.60
Line 4: Total expenditures this period (page 5, line 14)
Line 5: Ending Balance (line 3 minus line 4)
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7)
Line 8: Name of bank(s) used: Dank
certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance civity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign nance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Igned under the penalties of perjury: (Treasurer's signature) Date
OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Igned under the penalties of perjury: Nelly Medina (Candidate's signature) Date: 10-30-2023

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

eport all receipts. Please include your committee name and a page number on each page.) Name and Residential Address Occupation & Employer				
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
9/05/23	Aiglinn Doyle 07602 25 Franconia St Workester MA	\$20		
09/06/23	Alex London 44 proctor st. Wokester MA 02606	\$20		
10/03/2-3	Andrew Kennedy webster MA 24 Negras St Apt 2 Webster MA	\$120		
4017613	39 Berwick St. Wascester MA	\$50		
09/29/23	Caridad Guzman worcegner MA Uz Lakegide ave after 02607	\$ 80		
40/26/3	Carol LeBert 81 electric st. Worcester MA 03610	B 100		
09/09/23	atherine 5xeggs 2 Dayton St Ast 12 Worcesker NA 01609	\$20		
09/05/27	Davil Coyne worker MA 201 Glendale Gt Workerter MA	¥100		
10/24173	David Le Boon Fr. 207 22 Illinois Fr. Unix 207 Workerker M. A. 02620	≸ 50		
09/2-5/23	David Slatkin 20 May Fairst, Worlester MA 20 May Fairst, Worlester 02603	\$100		
10/20123	David Spanagrel 282 6098 lane Lancaster MXD7523	445		
09/07/23	Edson Montero 97 Hendraw St. Workegter MA 02603	\$50		
ine 9: Total Recei	pts over \$50 (or listed above)	16 55		
ine 10: Total Rece	ipts \$50 and under* (not listed above)	120		
ine 11: TOTAL F	RECEIPTS IN THE PERIOD	9675	← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
09/21/23	Etel Haxhiaj u Englewood Workerter MA 02603	\$ 100	Wolcester City Councilor City of Worcester
09/02/23	Gina Melendez 157 Brookline 4t, Workeyer MA 02603	₹50	
09/07/23	Kathleen Moylan 27 Breeze Or Walcestel MA01601	¥200	
10/47/23	Kevin Ksen 4 Englewood Lye Workester MA01603	141 na	
(0/26/23	Kimberly Rogers MX UPark H Northborough 02532	\$100	
10/26/23	Mark Lagerte MA Henshaw stworzer MAS	H100	technical writer
09/11/23	Neverda Guzman 144 Parcheger of Work offer MA Clariffer Andrea	\$100	
40/04/27	Sheller Rodman 14 saxok as, Workester MA 02602	¥100	Community advocate Self-employed
09/09/23	Shery 1 Vaillette 3 W. Nain St. Westminaer M. Jurs	\$50	
20129/23	Wireless X Perts 2052 Main 5+. Wakester MA 2052 Main 5+. 02603	¥300	Cell phone repair business
		[#.]	
	pts over \$50 (or listed above)	\$17,100	
	ipts \$50 and under* (not listed above)	9325	
	RECEIPTS IN THE PERIOD	17200	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
07/31B	Printsource	222 Weather stone Drive Wolcester MA 04604	falm cards	£345.31
09/15/03	Print Source	272 Weatherston Prise Walester MAO 1604	Palm cards	\$ 272.92
09/20/20	Printsource	122 Weatherfor Drive	Signs	4475,25
10120123	Printsource	422 Weather stone Prive Wolcestel MADSON	Palm Cardo	\$366.S6
[0/26/35	Tacos Mexico	591 Park Ave Worcester MA 02603	food thate for fundrainer	y314
		Line 12: Total Expenditures over	er \$50 (or listed above)	\$161399
		Line 13: Total Expenditures \$50	and under* (not listed above)	110
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$1834

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions		
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	43.37
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	43,34

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
69/05/23	Apollo Lwange	12 Abbottsti Worcester MA OKON	Video editing Frapnic dealgn	\$400
				1400



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 06,	/20/2023 Ending Date: 08/28/2023
Type of Report: (Check one)	
⊠ 8th day preceding preliminary	30 day after election year-end report dissolution
Nelly Medina Candidate Full Name (if applicable) Worcester School Committee Member District E Office Sought and District 34 Lakeside Ave Apt 3, Worcester, MA 01603	Committee to Elect Nelly Medina Committee Name Brian Mulhearn Name of Committee Treasurer 34 Lakeside Ave Apt 3, Worcester, MA 01603
E-mail: Madina garaa 2022 @g mail. (om Phone # (optional):	E-mail: Dhuhearn Wollester, edu Phone # (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	n/a
Line 2: Total receipts this period (page 3, line 1	1) \$1595
Line 3: Subtotal (line 1 plus line 2)	\$1595
Line 4: Total expenditures this period (page 5, 1	ine 14) \$1183,40
Line 5: Ending Balance (line 3 minus line 4)	\$422.60
Line 6: Total in-kind contributions this period (page 6) \$\ \forall 0
Line 7: Total (all) outstanding liabilities (page 7	9345.31
Line 8: Name of bank(s) used: Donk	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury:	d contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to tactivity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporti	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period that are not otherwise disclosed in this report.
	the best of my knowledge and belief, a true and complete statement of all campaign nts, in-kind contributions and liabilities for this reporting period and represents the this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	Date: 8-28-2023

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address	Amount	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	Aimee Kewley 30 Dutton St, Worcester, MA 01610		
08/06/2023		\$100	
<u> </u>	Alfredo Torres		Shipping and Delivery/CVS Pharmacy
	6 Wachusett Street, Worcester, MA 01609		
07/14/2023		\$200	,
	Andrew Saltzberg		
	10 S Buffum St, Worcester MA 01603		
07/27/2023		\$25	
	Caridad Guzmán		
	42 Lakeside Ave Apt 4, Worcester MA		
08/09/2023	01603	\$100	
	David LeBoeuf		
00/47/0000	21 Illinois Street Unit 303 Worcester, MA		
08/17/2023	01610	\$100	
	David Spanagel		
07/06/2023	282 Goss Lane, Lancaster, MA 01523-2166	\$35	
07/00/2023		\$33	
	Dylan Clark 218 WALNUT HILL RD, BARRE, MA 01005		
07/26/2023	216 WALINGT RILL RD, BARRE, MA 01003	\$20	
	Edward McKeon		
	76 Circuit Ave N, Worcester, MA 01603		
07/28/2023		\$35	
	Etel Haxhiaj		
	4 Englewood Ave, Worcester, MA 01603		
08/12/2023		\$100	
	Fran Peterson		
	1 Ashmore Road, Worcester, MA 01602	[[
08/03/2023		\$25	
	Friends of Charlene DiCalogero		
08/02/2023	PO Box 70, Lancaster, MA 01523	1	
00/02/2023		\$50	
ļ	Mark Laserte		{
07/31/2023	41 Henshaw St. #2, Worcester MA 01603	\$150	
		4230	
Line 9: Total Rece	ipts over \$50 (or listed above)	\$940	
ing 10. Total Dans	sinta \$50 and undoubt (not listed all array)		
Line IV: I otal Kece	eipts \$50 and under* (not listed above)	<u> </u>	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$1595	Enter on page 1, line 2
	d receipts of \$50 and under include them in line		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
07/03/2023	Martin Omasta 152 North Hatfield Road, North Hatfield, MA 01066	\$100	
08/25/2023	Mike Fadel 1205 Hancock Street #802 Quincy, MA 02169	\$100	
07/04/2023	Nathaniel Needle 151 SHREWSBURY ST. Apt. 5, WORCESTER, MA 01604	\$25	
08/16/2023	Philip Katz 37 Kensington Avenue Newton, MA 02465	\$50	
08/06/2023	Philip Saal 32 Barnard Rd, Worcester, MA 01605	\$50	
07/05/2023	Ramon Gonzalez 4 Ash Street, Worcester, MA 01608	\$100	
07/28/2023	Richard Vaillette 3 West Main St. Westminster, MA 01473	\$60	
08/02/2023	Sarah Plutnicki 38 Howarth Drive, Upton, MA 01568	\$20	
08/01/2023	Shelley Rodman 14 Saxon Rd, Worcester, MA 01602	\$100	
08/24/2023	Lynn Norris 3 Circuit Ave, Worcester MA 01602	\$50	
Line 9: Total Recei	pts over \$50 (or listed above)	\$655	
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	\$1595	Enter on page 1, line 2 d include only those receipts not itemized above.

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Data Data	To Whom Paid	Address	D	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	ActBlue	14 Arrow Street Suite 11. Cambridge, MA 02138	Fees	
07/09/2023		III damonage, ha ozzas		\$10.
	ActBlue	14 Arrow Street Suite 11.	Fees	
		Cambridge, MA 02138		
07/16/2023				\$7.9
	ActBlue	14 Arrow Street Suite 11.	Fees	
07/30/2023		Cambridge, MA 02138		
07/30/2023)			\$5.
	ActBlue	14 Arrow Street Suite 11. Cambridge, MA 02138	Fees	
08/06/2023				\$11.0
	ActBlue	14 Arrow Street Suite 11.	Fees	
		Cambridge, MA 02138		
08/13/2023				\$3.9
	ActBlue	14 Arrow Street Suite 11.	Fees	
		Cambridge, MA 02138		
08/20/2023				\$5.9
	ActBlue	14 Arrow Street Suite 11.	Fees	
08/28/2023		Cambridge, MA 02138		\$3.9
	Brian Mulhearn	1 10 Wilde Drive Wesseller MA	Treasurer	T
	Drian Muinearn	18 Wyola Drive, Worcester MA	Ireasurer	
08/09/2023				\$40
	Harland Clarke	15955 La Cantera Pkwy San	Checks	
		Antonio, TX, 78256		
08/04/2023				\$30.7
	PrintSource	122 Weatherstone Drive,	Palm Cards	
08/01/2023		Worcester MA 01604		\$345.3
00/04/4000		J L		4575.
	PrintSource	122 Weatherstone Drive, Worcester MA 01604	Lawn signs and stakes	
08/23/2023				\$342.3
	TD Bank	1227 Main St, Worcester, MA	Maintenance Fee	
		01603		
08/17/2023				\$:
		Line 12: Total Expenditures or	ver \$50 (or listed above)	\$1182.4
				\$1105.
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Entar on man 1 line 4 .	Line 14: TOTAL EXPENDIT	TIDES IN THE DEDIAN	
If you have iter	Enter on page 1, time 4	LINE 14. I OTAL EAFERDII	URES IN THE FERIOD	\$1183.

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid	Address	Durmone of F-man 224	A
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
ļ				<u> </u>
				\\
Ji				
			[[
()				{
				<u> </u>
		Line 12: Evenanditures area 650) (or listed shows)	190
		Line 12: Expenditures over \$50	o (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$1183,48

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

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
09/22/2022	PrintSource	122 Weatherstone Drive, Worcester MA 01604	Palm Cards	\$345.31
08/23/2023				\$343.31



Form CPF M101: STATEMENT OF ORGANIZATION **CANDIDATE OR CANDIDATE'S COMMITTEE MUNICIPAL FORM**

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

SIGNED UNDER THE PENALTIES OF PERJURY:

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, organization of a candidate or candidate's committee as follows:

CANDIDATE:	Full Name:	Nelly Medina						
	Residential Address:	34 Lakeside Ave,	Apt 3					
	City / State / Zip:	Worcester				MA	01603	<u> </u>
ļ	E-Mail Address: ma	adinagarcia2022@g	gmail.con	n		Phone #:	508-667-2	2471
ĺ	Party Affiliation:							(If applicabl
OFFICE SOUG	HT/PURPOSE:							_
	Title:	Worcester School	Committ	ee Member		District:	E	[m]
	Candidate without date and file with	at committee (check if a clerk or local election	ipplicable). official.	If checked, do not co	omplete committe	e or office	r sections: sig	n as candidate,
COMMITTEE:	Name of Committee:	Committee to e	lect Nelly	Medina				N -
	Committee Mailing Add	(The name	of the comm	ittee must include the	candidate's last name	·)		7
	City / State / Zip:	Worcester		MA 010	603	Phone #:	551-250	
OFFICERS:						•		
Chairperson: N	elly Madenia			Treasurer*:	Brian Mulhearn			
Residential Address: 34	4 Lakeside Ave, Apt	3		Residential Address:	18 Wyola Drive			
City / State / Zip: W	/orcester	MA 016	i03	City / State / Zip:	Worcester		MA	01603
Phone #: 551-250-	7352			Phone #: 508-66	7-2471 Email:	bmu	ılhearn@wor	cester.edu
		Addition	al officers m	*A public employee r	nay not serve as trea	surer of any	political comp	nittee (see reverse
Check applicable box	before signing:			y oo maad on page two	·			
or committee on their keeping detailed acco	behalf, 3) am subject i	consent to this filing; 2) to certain duties and lia campaign finance activon my behalf.	bilities unde	er M.G.L. c. 55, inch	uding the timely fi	ling of car	npaign financ	e reports and
subject to certain duti	on their behalf; 3) ack es and liabilities under	consent to this filing nowledge if I become a M.G.L. c. 55 including six years from the date	a public emp the timely	oloyee I must organi filing of campaign f	ze a committee an	d may not	serve as treas	urer, and 4) am
SIGNED UNDER TH	E PENALTIES OF PI	ERJURY: Candid	uu 7	nedina			Date:	06/20/23
that: 1) I am subject to and records of all cam	o certain duties and lial spaign finance activity loyee, I must resign thi	e above-named committed bilities under M.G.L. c. for a period of six years is position and notify O	tee. I affirm 55, including s from the d	that I am not a publing the timely filing of	of campaign finan- lection; 2) if after	ce reports and accept	and keeping d ance of this of	letailed accounts ffice I become ar
SIGNED UNDER TH	IE PENALTIES OF P	ERJURY: Treasur	er's signatu	Milheum		- 65	Date:	06/20/23
I hereby accept the off	fice of Chairperson of	the above-named comm	nittee.					
SIGNED LIMBED TU	E DENIAL THES OF DE	7100	e m.d				Date:	06/20/23

Chairperson's signature

DEFINITION OF A PUBLIC EMPLOYEE

M.G.L. Chapter 55, Section 13 states that a person who is employed for compensation by the Commonwealth or any county, city or town (other than an elected official) may not directly or indirectly solicit or receive political contributions. Such persons may not serve as treasurers of any political committee. If you are unsure of your status, please contact OCPF for further guidance.

SELECTED EXTRACTS FROM M.G.L. C. 55

Section 1 defines a candidate's committee:

"Candidate's committee", the political committee organized on behalf of a candidate The term "candidate's committee" shall also apply to the campaign fund of a candidate who has not organized a political committee for the purpose of carrying out the election campaign of such candidate or who receives contributions or makes expenditures independently of said committee.

Section 2 requires candidates to keep certain records:

Every candidate shall keep detailed accounts of all contributions received by him, or by a person acting on his behalf and of all expenditures made by him, or by a person acting on his behalf. Said accounts may be kept by an agent duly authorized thereto, but the candidate shall be responsible for said accounts, which shall be kept separate and distinct from all other accounts and shall include contributions made by the candidate shall preserve all receipted bills and accounts relative to all contributions received, expenditures made and any other campaign finance activity. ...The candidate shall preserve said receipted bills and accounts for six years from the date of the relevant election....

Section 3 requires the director to:

"assess a civil penalty for any [late filed] report ... of twenty-five dollars (\$25) per day [up to \$5,000 per report]. In the case of failure to file by a candidate or a candidate's committee, the civil penalty shall be assessed against the candidate

Section 5 outlines statements of organization of political committees:

Each political committee shall organize by filing with the director or, if organized for the purpose of a city or town election only, with the city or town clerk, a statement of organization.

The statement of organization shall include: (1) the full name of the political committee, which, if organized on behalf of a candidate, shall include the name of the candidate in said name; (2) the address of the political committee; (3) a statement of the purpose for which the political committee is organized (4) the name and residential address of the chair and the treasurer; (5) the name, residential address, and position of other principal officers, including officers and members of the finance committee, if any, and; (6) the name and address, if known, and party affiliation of each candidate the political committee is supporting; provided, however, that if a candidate is nominated without reference to a political party, the name of his political party shall not be required

Any change in information previously submitted in a statement of organization shall be reported to the director, or if organized for the purpose of a city or town election only, to the city or town clerk, within ten days following the change.

Each political committee shall have a treasurer who shall qualify for his office by filing a written acceptance thereof with the director, or if organized for the purpose of a city or town election only, with the city or town clerk. Said treasurer shall remain subject to all the duties and liabilities imposed by this chapter until his written resignation of the office is received or his successor's written acceptance is filed as aforesaid. No person acting under the authority of, or on behalf of, any political committee shall receive any money or anything of value, or expend or disburse the same, or incur expenses while it has no treasurer qualified as aforesaid

Each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts as prescribed for a candidate by the provisions of section two. Each treasurer of a political committee shall keep said records for a period of six years following the date of the relevant election

No expenditure shall be made for, or on behalf of, a political committee without the authorization of the chair or treasurer, or their designated agents

All funds of a political committee shall be kept separate from any personal funds of officers, members or associates of such committee

IMPORTANT: M.G.L. c. 55, s. 5 requires that any changes in the information provided on this form shall be filed within ten (10) days of said change. Further information can be obtained from OCPF by phone at (617) 979-8300, via e-mail at ocpf@mass.gov or on the web at http://www.mass.gov/ocpf.

ADDITIONAL OFFICERS: Other Officer/Title: Residential Address: City / State / Zip: Phone #: Other Officer/Title: City / State / Zip: Phone #:

DEFINITION OF A PUBLIC EMPLOYEE

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No expenditure shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents

All funds of a political committee shall be kept separate from any personal funds of officers, members or associates of such committee

IMPORTANT: M.G.L. c. 55, s. 5 requires that any changes in the information provided on this form shall be filed within ten (10) days of said change. Further information can be obtained from OCPF by phone at (617) 979-8300, via e-mail at ocpf@cpf.state.ma.us or on the web at www.ocpf.us

	CPF	ID	#:
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(For Office Use Only)



Form CPF D103: Appointment of Depository Bank Office of Campaign and Political Finance

Committee Name:	Committee to elect Nelly Medina		
ı	rict: School Committee Member District E		
Candidate Name:	Nelly Medina	2023	. X
Candidate E-Mail:	madinagarcia2022@gmail.com		3
Treasurer Name:	Brian Mulhearn	22	
Treasurer E-Mail:	bmulhearn@worcester.edu		23
	ACTIVITY PRIOR TO ESTABLISHING DEPOSITORY BANK ACCOUNT	Ŋ	.0
incurred liabilities f	Please check one indidate or committee raised or spent money, including the candidate's own funds, received in-kind contribution political purposes prior to establishing this bank account? es: Continue with this form and contact OCPF. A report will be e-filed to disclose this activity.	<u>ූ</u> ibutions	or
N	o: Continue with this form.		
the Director of the (hat the bank named below has been designated as the depository for campaign funds and I authorize said office of Campaign and Political Finance the reports required by M.G.L. Chapter 55. I agree that all firthe bank account is opened shall be conducted through the depository account.		
SIGNED UNDER 1011 Me Signature of Candi		_	#8
3,000	(Below to be completed by bank)		

BANK ACKNOWLEDGMENT

The undersigned bank is authorized to transact business and has its main office, or a branch office, in Massachusetts. The bank hereby acknowledges that it has been designated as the depository for campaign funds of the above named candidate or committee and agrees to file campaign finance reports with OCPF as required by c. 55 until such time as OCPF notifies the bank that its reporting requirements are no longer required.

Bank Name:	Date:
Date Account Opened:	Authorized by:
Phone #:	
E-mail:	
Bank Mailing Address:	
City / State / Zip:	

One Ashburton Place, Room 411, Boston, MA 02108 Phone: 617-979-8300

www.OCPF.us

ocpf@mass.gov





Form CPF 101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE

Office of Campaign and Political Finance

File with: Director
Office of Campaign and Political Finance

One Ashburton Place, Room 411, Boston, MA 02108

(617) 979-8300 / (800) 462-OCPF ocpf@mass.gov www.mass.gov/ocpf

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	First Name: Nelly			Middle Initial:	Last Name: Nel	ly Medina		
	Residential Address:	34 Lakeside Av	/e				·	
	City / State / Zip:	WORCESTER				MA 01603	-	
	Email Address:	madinagarcia2	:022@gmail.com					
	Party Affiliation: (if	applicable)		P	hone #: 551-25	50-7352		
APPLICE COLIC	HTMHDDASE.						\$	0 0
OFFICE SOUG			and Committee Me	ambar			P	02
	Title:		ool Committee Me	ambei			ψ.	C)
	District:	<u>E</u>						Ch.
COMMITTEE:	Name of Committee		to a Stack Maller	Madian				
COMMITTEE.	Name of Commission	COITING	The name of the comm	nittee must include the	candidate's last na	me)		
	Committee Mailing		eside Ave					
	City / State / Zip:	WORCE	STER	MA 01	603	Phone #:	551-250	-7352
OFFICERS:		.		Treasurer*:	Brian Mulhea	nro		
_	Helly Medina			Residential Address:			1,5	
Residential Address: 3			A 01603	City / State / Zip:	Worcester		MA	01603
_		7170071217				worcester.edu		
-	nadinagarcia2022 551-250-7			- Email: Phone #:		366-72471	····	
Phone #:		-	may not serve as tre	surer of any political	committee (see r	everse).		
I hereby consent to t behalf. I am aware t the relevant election SIGNED UNDER T	that candidates are r	equired to keep d	and that a candidate etailed accounts and	shall not give conserved records of all campa	nt to the organiz nign finance acti	zation of more t	I OI SIX YEAR	amittee on his from the da
that: 1) I am subject	to certain duties an impaign finance act iployee, I must resig d on his/her behalf.	d liabilities under ivity for a period on this position an	ed committee. I affir M.G.L. c. 55, inclu	m that I am not a publing the timely filing the date of the relevant my resignation; and 3)	election: 2) if at	fter my acceptai	nce of this or reasurer of the	ffice I becon
I hereby accept the SIGNED UNDER T	office of Chair of th	e above-named co OF PERJURY:	ommittee. Chair's signature	redind			Date:	6/1/23

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