

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance Worcester City Clerk

| Commonwealth of Massachusetts | File with: City or Town Clercor Election Commissi |
|---|---|
| Fill in Reporting Period dates: Beginning Date: jo | /71/2023 Ending Date: 1/22/2024 |
| Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election | ☐ 30 day after election |
| Candidate Full Name (if applicable) District Office Sought and District Residential Address E-mail: Phone #: | Committee to Elect Jernol Kamara Chary Mulbal Name of Committee Treasurer Grant St Worcester, MA Story Committee Mailing Address E-mail: Phone #: |
| SUMMARY BALAN | NCE INFORMATION: |
| Line 1: Ending Balance from previous report | 4/64.63 |
| Linė, 2: Total receipts this period (page 3, line 12) | 475.00 |
| Line 3: Subtotal (line 1 plus line 2) | 4639-63 |
| Line 4: Total expenditures this period (page 5, line 1 | |
| Line 5: Ending Balance (line 3 minus line 4) | - 85-55 |
| Line 6: Total in-kind contributions this period (page | 6, line 18) S18-94 |
| Line 7: Total (all) outstanding liabilities (page 7, line | e 19) |
| Line 8: Total out-of-pocket expenses this period (pag | ge 8, line 22) |
| Line 9: Name of bank(s) used: | |
| activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority of an behalf of this computer. Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I cardidate with Committee I certify that I have examined this report including attached schedules and it is, to activity, 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 report Candidate without Committee I certify that I have examined this report including attached schedules and it is, to | (Treasurer's signature) Date: 1/22/2024 Thox only) 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 ting period that are not otherwise disclosed in this report. |
| finance activity, including contributions, loans, receipts, expenditures, disburseme campaign finance activity of all persons acting under the authority or on behalf of Signed under the penalties of perjury: | ents, in-kind contributions and liabilities for this reporting period and represents the f this candidate in accordance with the requirements of M.G.L. c. 55. Date: Date: |

SCHEDULE A: RECEIPTS

A.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 ear. 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 ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|---------------|--|---------|--|
| 10/31/23 | Attinded Frolowole 27 Notrest workester MA | SD.00 | |
| 11/1/2023 | June Eressy 86 Moore ARC Worcester | 50.00 | |
| 11/4/2023 | Celie Bluc 19 Liberty St worcester MA | 100.02 | |
| | Isabel Gonzalez 13 Ferdinand St Morcester | 25.00 | |
| 11/8/2023 | 676 Hommond St WILLIMA | 50.00 | |
| | Michael Moore 20 Bengston In Millbury, MA | [00.00] | |
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SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|--------------------|--|---------|---|
| | | | (for contributions of \$200 or more) |
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| ne 10: Total Recei | pts over \$50 (or listed above) | 350.00 | * If you have itemized receipts of \$50 and under, include them in line 10. Line 11 |
| ne 11: Total Recei | pts \$50 and under (not listed above) | 125.00 | should include only those receipts not itemized above. |
| ne 12: TOTAL R | ECEIPTS IN THE PERIOD | 350,000 | 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 D. 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 |
|-------------|-------------------------------------|---|------------------------------------|---------|
| 11/6-7/2023 | Group Text Messages Brevo | 7 porter st Worcester, MA | Caroup Text Message | 191.84 |
| 11/63/2023 | Figlifa Forenew | 4 Alexander Ave Clinton, MA 0151D | Campaign | 1000.00 |
| 1413/2003 | Print Source | Morcester, MA 01604 | Hand Bill | 226 03 |
| 11/28/2013 | Relsey Willet | 18 Berry St Quincy, MA 5269 | Digital and social media design | 2468.00 |
| 12/29/23 | French Amin | 30 Ceder St Morcester, MA | Theck 108 | 133.26 |
| 11/12/23 | Print source | TCZ Wecetherstonedr Worcester, MA OLOH | Hond Bill Miller | 224.18 |
| 12/4/23 | Cigi Rivas | 3 Courtland St WorcesteriMA | Check 53 Litera comp. | WD.00 |
| | | | Chack with | 133-50 |
| 12/5/2023 | aigi Privas | 3 Courtoud St Worlester, MA | Intern Comp. | 355.50 |
| 1/27/23 | Act Blee | | Fees | 14.83 |
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SCHEDULE B: EXPENDITURES (continued)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|----------------|---|----------------------------------|--------------------------|--------|
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| * If you have | e itemized expenditures of \$50 clude them in line 13. Line 14 | Line 13: Expenditures over \$50 | (or listed above) | |
| should include | de only those expenditures not itemized above. | Line 14: Expenditures \$50 and t | under (not listed above) | |
| | Enter on page 1, line 4 → Line 15: TOTAL EXPENDITURES IN THE PERIOD | | | |

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

vi.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 ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

| lude the candidate (| or committee name and a-page number on | each additional page. | | |
|----------------------|--|--|-----------------------------|--------|
| Date Received | From Whom Received* | Residential Address | Description of Contribution | Value |
| 11/10/23 | Termon Gramewell | 7 Porter St Worcester, MA | Compaign | 287.58 |
| 12/05/23 | Yemi Derrick | | Donatorn | 281.36 |
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| | itemized in-kind contributions of | Line 16: In-Kind Contributions ov | er \$50 (or listed above) | |
| | r, include them in line 16. Line 17 lude only those expenditures not itemized above. | Line 17: In-Kind Contributions \$50 and under (not listed above) | | |
| | Enter on page 1, line 6 → | Line 18: TOTAL IN-KIND CONT | TRIBUTIONS IN THE PERIOD | 58.94 |

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 |
|---------------|---|---------|---------|--------|
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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 |
|--|--|--------|--|
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| Line 20: Total Itemiz (or listed above) | zed Out-Of-Pocket Expenditures Over \$50 | | * If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 |
| | mized Out-Of-Pocket Expenditures \$50 and ove) | | should include only those expenditures not itemized above. |
| Line 22: TOTAL OUT | OF-POCKET EXPENDITURES IN THE PERIOD | | ← 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: 01/0 | 1/2023 Ending Date: 10/30/2023 |
| Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election | ☐ 30 day after election ☑ year-end report ☐ dissolution |
| District C Office Sought and District Residential Address E-mail: Phone # (optional): | Committee to Elect Jermoh Kamara Committee Name Cheryl Mulbah Name of Committee Treasurer 63 Orient St Worcester MA 01604 Committee Mailing Address E-mail: |
| SUMMARY BALANC | E 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) Line 4: Total expenditures this period (page 5, line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 7) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Berkshire Bank | 253.61 11,866.00 12,119.61 7972.98 4,164.63 |
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority of on befalf of this committee in Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be | contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 10/10/173 |
| Candidate with Committee Candidate with Committee Candidate with Commi | e best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period that are not otherwise disclosed in this report. The best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the |

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.)

| | Name and Residential Address | | Occupation & Employer |
|--------------------|--|--------|--------------------------------------|
| Date Received | (alphabetical listing required) | Amount | (for contributions of \$200 or more) |
| 10/14/2023 | Ayon Hacker 241 Pilgrim Ave Worcester, MA 01604 | 50.00 | |
| 7/21/2023 | Charles Kpannah | 101.00 | |
| 7/30/2023 | Charles Kolubah 571 Greenbrook Rd North Plainfield, NJ | 50.00 | |
| 3/09/2023 | Frank Callihan 53 Elm Street Worcester, MA01609 | 20.00 | |
| 8/23/2023 | Frances Anthes 8 Congress Street Worcester, MA 01609 | 100.00 | |
| 3/19/2023 | Jennifer Gaskin | 50.00 | |
| 7/26/2023 | Jacqueline Duval 92 Lake Avenue Worcester, MA 01604 | 100.00 | |
| 3/23/2023 | Jermoh Kamara | 100.00 | |
| 8/23/2023 | Lisa Cook 175 James Street Worcester, MA 01603 | 25.00 | |
| 7/26/2023 | Margaret Wong | 100.00 | |
| 3/23/2023 | Margaret Wong | 100.00 | |
| 7/20/2023 | Mary Keefe 10 Oxford Street Worcester, MA 01609 | 100.00 | |
| Line 9: Total Reco | eipts over \$50 (or listed above) | 701.00 | |
| Line 10: Total Rec | eipts \$50 and under* (not listed above) | 195.00 | |
| ine 11. TOTAL | RECEIPTS IN THE PERIOD | 896.00 | ← 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

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

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

report all receipts. Please include your committee name and a page number on each page.)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|---------------------|--|---------|--|
| 1/1-10/20/2023 | ACTBlue POBOX HAITING sumerning | 620.00 | |
| 1/4/2-3 | Douid Coyne 12 alendale st 2 horcester 01602 | (00.00) | |
| 14123 | David Coyne 12 alendole st Inforcester | 100.00 | |
| 1013/23 | Peris Darrigand 770 Salibury St VIOICESICO MA 01609 | 100.00 | |
| 8/7/23 | frances Anthes dengress St workester, MA 01604 | (00.00) | |
| 8/2/23 | Tormon bramera 10' Routh 8+ worcester, MA deany | 150,00 | |
| 8/25/23 | Franklin Jones 86 Rusalena Ph Wy worcester MA 01605 | 200.00 | Human Service Morcester Proconcry Cente |
| 9/13/23 | Food Sale / Fundraiser | 700.00 | |
| alistas | Our Meighbor Ourvoice Footsale-/pundraiser | 270.00 | |
| 10/9/2023 | African Good sale pundraison | 1475.00 | |
| 10/14/2023 | Koromer Anathesia and Nursing 2600 Matalie | 100.00 | |
| | totherine Barnard & Over meen St Valurcester | 100.00 | |
| Line 9: Total Recei | ipts over \$50 (or listed above) | 9395.00 | |
| Line 10: Total Rece | ripts \$50 and under* (not listed above) | | |
| ine 11: TOTAL F | RECEIPTS IN THE PERIOD | 9395.00 | ← 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) |
|---------------------|--|--------|--|
| 10/15/2023 | Ken Asofo Adjei Samoset St Worcester, MA 01604 | 150.00 | |
| 10/14/2023 | Kahoro Joseph Houghton St Worcester, MA 01604 | 150.00 | |
| 10/3/2023 | Linda Cavaioli 770 Salisbury St Worcester, MA 01609 | 100.00 | |
| 1/4/2023 | Maria Lopez 344 Brook St Worcester, MA 01406 | 35.00 | |
| 3/18/2023 | More Chingor 35 Hadley Village Rd Hadley, MA 01075 | 100.00 | |
| 1/4/2023 | Priscila Fspinosa 314 Highland St Worcester, MA 01602 | 50.00 | |
| 1/4/2023 | Paul Julian PO Box 16244 Worcester, MA 01601 | 50.00 | |
| 10/14/2023 | Suliman Kamara 10 Roath St Worcester, MA 01604 | 100.00 | |
| 10/14/2023 | Sayon Johnson 30 Almont Ave Worcester, MA 01604 | 50.00 | |
| 1/4/2023 | Todd Rodman 14 Saxon Rd Worcester, MA 01602 | 75.00 | |
| 9/13/2023 | Timothy Connolly 21 Ansing St Worcester, MA 01605 | 50.00 | |
| 9/15/2023 | Tom Hartvig Thomasen 574 Chandler St Worcester, MA 10602 | 25.00 | |
| 9/13/2023 | Schmitt Richard 65 Tory St Worcester, MA 01602 | 50.00 | |
| Line 9: Total Rece | ipts over \$50 (or listed above) | 675.00 | |
| Line 10: Total Reco | eipts \$50 and under* (not listed above) | 310.00 | |
| Line 11: TOTAL | RECEIPTS IN THE PERIOD | 985.00 | ← 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) |
|--|--|--------|--|
| | | | |
| 6/29/2023 | Robin VanLiew 1 Avery Road Holden, MA 01520 | 40.00 | |
| 7/05/2023 | Robin VanLiew 1 Avery Road Holden, MA 01520 | 200.00 | |
| 3/18/2023 | Wanja Kiraguri | 100.00 | |
| 3/17/2023 | William Baller 56 Elm St Worcester, MA 01609 | 40.00 | |
| 9/27/2023 | William Baller 56 Elm St Worcester, MA 01609 | 50.00 | |
| 10/4/2023 | Warner Fletcher 11 Monmouth Rd Worcester, MA 01609 | 200.00 | |
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| Line 9: Total Rece | ipts over \$50 (or listed above) | 500.00 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 90.00 | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 590 | ← Enter on page 1, line 2 |

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

SCHEDULE B: EXPENDITURES

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

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

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|------------|-------------------------------------|---|------------------------------------|---------|
| 4/7/2023 | MASS DEMS(Mass Democratic Party) | 11 Beacon St Suite 410 Boston, MA 02108 | Vote Buiders | 600.0 |
| 7/10/2023 | Bryce Maloney | 535 Chandler Street Worcester, MA 01602 | Campaign Manager Compensation | 500.00 |
| 9/05/2023 | Bryce Maloney | 535 Chandler Street Worcester, MA 01602 | Campaign Manager Compensation | 500.0 |
| 8/09/2023 | Don Shortman | | Lawn Sign | 1001.88 |
| 3/06/2023 | GoDaddy | 2155 E GoDaddy way Tempe, Arizona | Campaign Website | 254.75 |
| 8/04/2023 | Green Hills Neighborhood Ass. | 24 Northhampton st apt 1 Worcester, MA 01605 | Donation | 100.00 |
| 10/6/2023 | Gigi Rivas | | Intern Compensation | 310.50 |
| 10/06/2023 | Kendra Anim | | Intern Compensation | 117.00 |
| 10/06/2023 | Kalifa Foreman | | Campaign Manager Compensation | 500.00 |
| 07/20/2023 | Maloney Bryce | 535 Chandler Street Worcester, MA 01602 | Campaign Manager Compensation | 500.00 |
| 04/24/2023 | Nche | | Education/Donation | 130.00 |
| 04/19/2023 | Print Source | | Mailer | 370.3 |
| | | Line 12: Total Expenditures | over \$50 (or listed above) | 4884.44 |
| | | Line 13: Total Expenditures | \$50 and under* (not listed above) | (|
| | Enter on page 1, line 4 → | Line 14: TOTAL EXPEND | ITURES IN THE PERIOD | 4884.44 |

^{*} 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 (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|------------|-------------------------------------|-------------------------------|-----------------------------|---------|
| 06/26/2023 | Print Source | | Mailer | 1723.23 |
| 9/26/2023 | Print Source | | Handbills | 370.31 |
| 10/18/2023 | Print Source | | Handbills | 740.00 |
| 03/20/2023 | Wholly Connoli | | Food for Fundraiser | 255.00 |
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| | | Line 12: Expenditures over \$ | 650 (or listed above) | 3088.54 |
| | | Line 13: Expenditures \$50 an | d under* (not listed above) | 0 |
| | Enter on page 1, line 4 → | | ITURES IN THE PERIOD | 3088.54 |

^{*} 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 |
|---------------|---------------------------|---|---------------------------------|--------|
| 9/30/2023 | Micke's Moonwalk Rentals | 144 Shrewsbury St Boylston, MA 01505 | | 209.38 |
| | | | | 79.69 |
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| | | | | |
| | | 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 → | Line 17: TOTAL IN-KIND CO | ONTRIBUTIONS | |

^{*} 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 we as those liabilities incurred during this reporting period.

| Date Incurred | To Whom Due | Address | Purpose | Amount |
|---------------|------------------|----------------------|-------------------------|--------|
| 10/20/23 | Print Source | | How Bill | 370,00 |
| | Print Source | | Mailer | 2633.7 |
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| | Enter on 1 1 2 8 | Line 19, TOTAL OUTST | ANDING LIABILITIES (ALL | |

Page 7



Form CPF T101: CHANGE OF TREASURER: ACCEPTANCE OF OFFICE BY TREASURER

CPF ID#:

| Commonwealth of Massachusetts | Office of Campaign and Political Finance | |
|---|--|---------------------------------|
| File with: Director Office of Campaign and Poli One Ashburton Place, Room Boston, MA 02108 | n 411 | 979-8300 mass.gov OCPF.us |
| 1. Committee Name: | Committee to Elect Termon Kamorer | |
| 2. New Treasurer*: | Cheryl Wulbah | |
| 2a Treasurer's Address: | *A public employee may not serve as treasurer of any political committee (see below). G3 Original 84 | |
| City/State/Zip: | Morcoster, MA OLGOM Phone #: 774-705 | 3-514 |
| Email Address: | cherylmuloch@gmais.com | |
| 3. Committee Mailing | | |
| | City/State/Zip: Worces&c MY 0604 Phone #: | |
| that: 1) I am subject to ce and records of all campai, appointed public employe political action committee | e of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I under train duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become, I must resign and notify OCPF of my resignations; and 3) a candidate or elected official may not serve as the treasurer of a except as authorized by MG.L. c. 55, s. 5A nor for the political committee organized on his/her behalf. PENALTIES OF PERJURY: Date: Date | counts |
| FOR CANDIDATE CO | Treasurer's signature | |
| | opointment of the new treasurer of this committee | |
| SIGNED UNDER THE P | PENALTIES OF PERJURY: | 01- |

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 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; and in all other instances, the civil penalty shall be assessed against the treasurer of a political committee

Section 5 outlines statements of organization of political committees:

... 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, or while the name and address of any of its officers or members, as originally or subsequently chosen, is not filed in accordance with the provisions of this section or chapter 52, as the case may be.

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 chairman or treasurer, or their designated agents