



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Received  
Worcester City Clerk

2019 SEP -4 AM 10:10

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 5/16/19 Ending Date: 9/3/19

Type of Report: (Check one)

8th day preceding preliminary     8th day preceding election     30 day after election     year-end report     dissolution

Mariah Lizmari Martinez  
Candidate Full Name (if applicable)  
School Committee Worcester  
Office Sought and District  
54 Parsons Hill Dr  
Residential Address  
E-mail: Martinezcommittee@gmail.com  
Phone # (optional): 774.242.5256

The Martinez Committee  
Committee Name  
Carrie Martinez  
Name of Committee Treasurer  
54 Parsons Hill Dr  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone # (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	\$ 428.00
Line 3: Subtotal (line 1 plus line 2)	\$ 428.00
Line 4: Total expenditures this period (page 5, line 14)	\$ 278.24
Line 5: Ending Balance (line 3 minus line 4)	149.76
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	<u>Digital Federal Credit Union</u>

#### Affidavit of Committee Treasurer:

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 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: Carrie Martinez (Treasurer's signature) Date: 9.3.19

#### 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: [Signature] (Candidate's signature) Date: 9.3.19

## 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)
5/16/19	Dario DiPietrantonio 61 Aspen Ave S. Grafton 01560	\$ 282.00	DDP Restaurants LLC
7/25/19	Gino Nuzzolilo 31 Southold Rd	\$ 100	
Line 9: Total Receipts over \$50 (or listed above)		\$ 382.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$ 46.00	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>428.00</b>	← 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.









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

**Office of Campaign and Political Finance**

File with: City / Town Clerk or Election Commission

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:** Full Name: Mariah Martinez  
 Residential Address: 54 Parsons Hill Dr  
 City / State / Zip: Worcester Ma 01603  
 E-Mail Address: MartinezCommittee@gmail.com Phone #: 774-242-5256  
 Party Affiliation: Independent (If applicable)

**OFFICE SOUGHT/PURPOSE:**  
 Title: School Committee  
 District: Worcester

**COMMITTEE:** Name of Committee: The Martinez Committee  
(The name of the committee must include the candidate's last name)  
 Committee Mailing Address: 54 Parsons Hill Dr  
 City / State / Zip: Worcester Ma 01603 Phone #: 774-242-5256

**OFFICERS:**

<b>Chairman:</b> <u>Mariah Martinez</u> Residential Address: <u>54 Parsons Hill Dr</u> City / State / Zip: <u>Worcester</u> <u>Ma</u> <u>01603</u> Phone #: <u>774-242-5256</u>	<b>Treasurer*:</b> <u>Carrie Martinez</u> Residential Address: <u>2 Carlstad St. Apt. 1</u> City / State / Zip: <u>Worcester</u> <u>MA</u> <u>01607</u> Phone #: <u>774-242-5113</u> Email: <u>CBnggsBK@yahoo.com</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>
<b>Other Officer/Title:</b> _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____	<b>Other Officer/Title:</b> _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____

(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature Date: 4.19.19

I hereby accept the office 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 understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign 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 an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature Date: 4/20/19

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature Date: 4.19.19