



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

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Office of Campaign and Political Finance  
WORCESTER CITY CLERK

2025 DEC -4 PM 3:20

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 10/27/2025

Ending Date: 12/4/2025

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)

Worcester School Committee - District E

Office Sought and District

8 Lakeside Ave. Apt. #2, Worcester, MA 01603

Residential Address

E-mail: nelly4districte@gmail.com

Phone #: (508) 859-0512

Committee to Elect Nelly Medina

Committee Name

Brian Mulhearn

Name of Committee Treasurer

8 Lakeside Ave. Apt. #2, Worcester, MA 01603

Committee Mailing Address

E-mail: bmulhearn@worcester.edu

Phone #: (508) 859-0512

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$1247.10

Line 2: Total receipts this period (page 3, line 12)

\$210

Line 3: Subtotal (line 1 plus line 2)

\$1457.10

Line 4: Total expenditures this period (page 5, line 15)

\$975.26

Line 5: Ending Balance (line 3 minus line 4)

\$481.84

Line 6: Total in-kind contributions this period (page 6, line 18)

\$0

Line 7: Total (all) outstanding liabilities (page 7, line 19)

\$0

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

\$0

Line 9: Name of bank(s) used:

TD Bank

#### 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:

(Treasurer's signature)

Date: 12/4/25

#### 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:

(Candidate's signature)

Date: 12/4/25

## 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 D 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/07	The Haxhiaj Committee 4 Englewood Ave Worcester, MA 01603	\$100	
10/27	Paul Popinchalk 34 Midland Street Worcester, MA 01602	\$100	
11/19	Hannah Weinsaft 31 Dunbar Street Worcester, MA 01603	\$10	Educator/Worcester Public Schools

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)		
Line 10: Total Receipts over \$50 (or listed above)		<b>\$210</b>	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>		
Line 11: Total Receipts \$50 and under (not listed above)		<b>\$0</b>			
<b>Line 12: TOTAL RECEIPTS IN THE PERIOD</b>		<b>\$210</b>	← 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.*

**Enter expenditure totals on Page 5**

**SCHEDULE B: EXPENDITURES (continued)**

\* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.

**Line 13: Expenditures over \$50 (or listed above)**

\$915.35

**Line 14: Expenditures \$50 and under (not listed above)**

\$59.91

Enter on page 1, line 4 →

**Line 15: TOTAL EXPENDITURES IN THE PERIOD**

\$975.26

## **SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

V.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 page.*

\* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.

Enter on page 1, line 6 →

**Line 16: In-Kind Contributions over \$50 (or listed above)**

\$0

**Line 17: In-Kind Contributions \$50 and under (not listed above)**

\$0

**Line 18: TOTAL IN-KIND CONTRIBUTIONS 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.*

Enter on page 1, line 7 →

**Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)**

\$0

**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.*

Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50  
(or listed above)

\$0

\* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.

Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)

\$0

**Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD**

\$0

← Enter on page 1, line 8



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
WORCESTER CITY CLERK

2025 OCT 27 PM 4:21

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 08/26/2025

Ending Date: 10/27/2025

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)

Worcester School Committee - District E

Office Sought and District

8 Lakeside Ave. Apt. #2, Worcester, MA 01603

Residential Address

E-mail: nelly4districte@gmail.com

Phone #: (508) 859-0512

Committee to Elect Nelly Medina

Committee Name

Brian Mulhearn

Name of Committee Treasurer

8 Lakeside Ave. Apt. #2, Worcester, MA 01603

Committee Mailing Address

E-mail: bmulhearn@worcester.edu

Phone #: (508) 859-0512

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$804.76

Line 2: Total receipts this period (page 3, line 12)

\$3806

Line 3: Subtotal (line 1 plus line 2)

\$4610.76

Line 4: Total expenditures this period (page 5, line 15)

\$3363.66

Line 5: Ending Balance (line 3 minus line 4)

\$1247.10

Line 6: Total in-kind contributions this period (page 6, line 18)

\$25.69

Line 7: Total (all) outstanding liabilities (page 7, line 19)

\$0

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

\$0

Line 9: Name of bank(s) used:

TD Bank

### 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:

*Brian Mulhearn*

(Treasurer's signature)

Date: 10/27/25

### 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:

*Nelly Medina*

(Candidate's signature)

Date: 10/27/25

## 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 D 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
09/02	Sean Ausmus 163 Brookline St Worcester, MA 01603	\$50	Customer Support, Berkshire Bank
09/21	Committee to Elect Domenica Perrone 3 Bates Ave Apt 2 Worcester, MA 01605	\$100	
09/28	Dante Comparetto 4 Manor St. Worcester, MA 01609	\$50	
10/10	Dante Comparetto 4 Manor St. Worcester, MA 01609	\$50	
09/12	Mary Depew 75 Trinity Ave Worcester, MA 01605	\$100	Not Employed
09/20	Mohammad Elrefaei 78A Parsons Hill Dr Worcester, MA 01603	\$100	Not Employed
09/27	EducateUs 4301 50th St NW, Suite 300, PMB 1124 Washington, DC 20016	\$250	
09/22	Margaret Green 21 Second St Worcester, MA 01602	\$100	Stockroom, UMass Memorial Health
08/27	Cardidad Guzman 85 Silver Leaf Way Marlborough, MA 01752	\$100	RNA, UMass Memorial
09/22	Cardidad Guzman 85 Silver Leaf Way Marlborough, MA 01752	\$50	RNA, UMass Memorial
09/16	David Le Boeuf 28 Ball St Worcester, MA 01603	\$75	Legislator, Commonwealth of MA
09/02	Keith Linhaires 1 Germain St Worcester, MA 01602	\$100	Portfolio Manager, Jazz Pharmaceuticals
10/24	Randall Lucas 210 Park Ave #210 Worcester, MA 01609	\$500	Finance, SaaS Capital

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/10	Susan Mailman 24 Holden St Worcester, MA 01605	\$100	Owner, Coghlin Electrical Contractors
10/10	Johanna McEvoy 125 Richmond Ave Worcester, MA 01602	\$75	Educator, Worcester Public Schools
09/02	Joseph McEvoy 125 Richmond Ave Worcester, MA 01602	\$100	
09/09	Maydee Morales 1 Guild Road Worcester, MA 01602	\$100	Program Director, Catholic Charities
08/26	Barbara Mudd 150 Crescent St West Boylston, MA 01583	\$50	
10/15	Barbara Mudd 150 Crescent St West Boylston, MA 01583	\$50	
09/26	Moses Dixon 15 Trahan Ave Worcester, MA 01604	\$100	
10/10	Gino Nuzzolillo 31 Southold road Worcester, MA 01607	\$250	Driver, UPS
10/10	Philip P. Palmieri 28 Buckingham St Worcester, MA 01605	\$125	retired
08/27	Carmen Negron 114 Elm St, Apt 1 Worcester, MA 01609	\$50	health educator, PPLM
10/04	Shelley Rodman 14 Saxon Road Worcester, MA 01602	\$250	Not Employed
10/05	Robin Van Liew 1 Avery Road Holden, MA 01520	\$100	
10/19	Hannah Weinsaft 31 Dunbar Street Worcester, MA 01603	\$10	
Line 10: Total Receipts over \$50 (or listed above)		\$2985	<p>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</p>
Line 11: Total Receipts \$50 and under (not listed above)		\$821	
<b>Line 12: TOTAL RECEIPTS IN THE PERIOD</b>		<b>\$3806</b>	
← Enter on page 1, line 2			Page 3

\* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.

## 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
08/28	Anokye Krom	21 Lovell St, 2 Coes Square Worcester, MA 01603	food + venue for fundraiser	\$564.02
09/13	Apollo Lwanga	12 Abbot St Worcester, MA 01602	website and graphic design	\$25
10/07	Apollo Lwanga	12 Abbot St Worcester, MA 01602	website and graphic design	\$20
10/22	Apollo Lwanga	12 Abbot St Worcester, MA 01602	palm card design	\$20
10/22	Apollo Lwanga	12 Abbot St Worcester, MA 01602	social media content design	\$20
09/18	PrintSource Group	122 Weatherstone Drive Worcester, MA 01604	mailers + banner	\$1138.61
09/25	PrintSource Group	122 Weatherstone Drive Worcester, MA 01604	palm cards	\$292.12
10/15	PrintSource Group	122 Weatherstone Drive Worcester, MA 01604	lawn signs + stakes	\$446.25
10/24	PrintSource Group	122 Weatherstone Drive Worcester, MA 01604	palm cards	\$255.00
10/10	Tacos Mexico	591 Park Ave Worcester, MA 01603	food + venue for fundraiser	\$437.50

**SCHEDULE B: EXPENDITURES (continued)**

*\* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.*

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)	\$3218.50
Line 14: Expenditures \$50 and under (not listed above)	\$145.16
<b>Line 15: TOTAL EXPENDITURES IN THE PERIOD</b>	<b>\$3363.66</b>

**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 page.*

*\* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.*

Enter on page 1, line 6 →

Line 16: In-Kind Contributions over \$50 (or listed above)	\$25.69
Line 17: In-Kind Contributions \$50 and under (not listed above)	\$0
<b>Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD</b>	<b>\$25.69</b>

**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.*

Enter on page 1, line 7 →

**Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)**

\$0

## 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
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)	\$0	<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i>	
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)	\$0		
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD	\$0		

← Enter on page 1, line 8

Page 8



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 01/22/2025

Ending Date: 08/25/2026

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)

**Worcester School Committee - District E**

Office Sought and District

**8 Lakeside Ave. Apt. #2, Worcester, MA 01603**

Residential Address

E-mail: [nelly4districte@gmail.com](mailto:nelly4districte@gmail.com)

Phone #: (508) 859-0512

**Committee to Elect Nelly Medina**

Committee Name

**Brian Mulhearn**

Name of Committee Treasurer

**8 Lakeside Ave. Apt. #2, Worcester, MA 01603**

Committee Mailing Address

E-mail: [bmulhearn@worcester.edu](mailto:bmulhearn@worcester.edu)

Phone #: (508) 859-0512

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

**\$96.05**

Line 2: Total receipts this period (page 3, line 12)

**\$4,883**

Line 3: Subtotal (line 1 plus line 2)

**\$4,979.05**

Line 4: Total expenditures this period (page 5, line 15)

**\$4,174.29**

Line 5: Ending Balance (line 3 minus line 4)

**\$804.76**

Line 6: Total in-kind contributions this period (page 6, line 18)

**\$0**

Line 7: Total (all) outstanding liabilities (page 7, line 19)

**\$0**

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

**\$50**

Line 9: Name of bank(s) used:

**TD Bank**

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2025 AUG 25 PM 4:42  
WORCESTER CITY CLERK

### 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:

*Brian Mulhearn*

(Treasurer's signature)

Date: 08/25/2026

### 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:

*Nelly Medina*

(Candidate's signature)

Date: 08/25/2026

## SCHEDULE A: RECEIPTS

4.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 over \$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 D 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04/12	Neamatallah Abdelkader 30 Latura St Shrewsbury, MA 01545-4317	\$250	unemployed
02/21	Carlos Garcia 10 Pond Avenue Shrewsbury, MA 01545	\$100	Advance Coordinator, MA Attorney General's Office
07/30	Ramon Gonzalez 4 ASH ST, APT 3 Worcester, MA 01608	\$100	Laborer, National Grid
02/23	Margaret Green 21 Second St Worcester, MA 01602	\$100	stockroom, UMass Memorial Health
07/13	Margaret Green 21 Second St Worcester, MA 01602	\$100	stockroom, UMass Memorial Health
03/06	Caridad Guzman 85 Silver Leaf Way Marlborough, MA 01752	\$100	RNA, Umass
04/11	Caridad Guzman 85 Silver Leaf Wy Marlborough, MA 01752	\$100	RNA, Umass
08/15	Caridad Guzman 85 Silver Leaf Way Marlborough, MA 01752	\$100	RNA, Umass
04/11	Jonathan P. Hardy-Lavoie 31 Elizabeth St #207 Worcester, MA 01605	\$100	case manager, Family Health Center of Worcester
04/11	Penelope Herideen 3 Westland St Worcester, MA 01602	\$200	professor, Holyoke Community College
07/11	Paul H. Julian PO Box 16 Worcester, MA 01613	\$100	retired
04/11	Mark Laserte 41 Henshaw St # 2, Worcester, MA 01603	\$200	technical writer, IPG Photonics
02/27	Susan Mailman 24 Holden St. Worcester, MA 01605	\$100	owner, Coghlins Electrical Contractors

## 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 D 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04/11	Susan Mailman 24 Holden St Worcester, MA 01605	\$50	owner, Coghlin Electrical Contractors
08/03	Susan Mailman 24 Holden St Worcester, MA 01605	\$100	owner, Coghlin Electrical Contractors
04/11	Johanna McEvoy 125 Richmond Ave, Worcester, MA 01602	\$250	educator, Worcester Public Schools
04/27	Maydee Morales 1 Guild Road Worcester, MA 01602	\$100	Program director, Catholic Charities
07/27	Nathaniel Needle 151 SHREWSBURY ST., Apt. 5 Worcester, MA 01604	\$100	piano teacher, self
04/11	Carmen Negron 114 Elm St, Apt 1 Worcester, MA 01609	\$100	health educator, PPLM
07/11	Carmen Negron 114 Elm St, Apt 1 Worcester, MA 01609	\$50	health educator, PPLM
04/29	Gino Nuzzolillo 31 Southold road Worcester, MA 01607	\$100	driver, UPS
04/11	Philip P. Palmieri 28 Buckingham St Worcester, MA 01605	\$125	retired
07/11	Philip P. Palmieri 28 Buckingham St Worcester, MA 01605	\$125	retired
03/19	Cory Root 33 Grow Lane PRINCETON, MA 01541	\$10	technical writer, MongoDB
04/11	Cory Root 33 Grow Lane PRINCETON, MA 01541	\$125	technical writer, MongoDB
02/22	Karen Sargent 142 Main St, #58 Westminster, MA 01473	\$100	retired

**SCHEDULE A: RECEIPTS (continued)**

\* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.

← 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
07/02	Amazon	www.amazon.com	candy for fundraiser	\$63.69
06/18	Antonio's Pizza	286 Chandler St, Worcester, MA 01602	pizza for canvasser meetup	\$58.27
04/23	Apollo Lwanga	12 Abbott St, Worcester, MA 01602	website and graphic design	\$150
07/20	Apollo Lwanga	12 Abbott St, Worcester, MA 01602	website and graphic design	\$100
08/19	Apollo Lwanga	12 Abbott St, Worcester, MA 01602	website and graphic design	\$20
04/14	Balloons All Over	19 Blake St, Northborough, MA 01632	balloons for fundraiser event	\$76
06/09	Enence	www.enence.com	translator for canvassing	\$94.56
08/14	Hunchback Graphics	75 Webster Street, W2nd - 2 Worcester, MA 01603	website design	\$150
04/18	Massachusetts Democratic Party	11 Beacon Street Suite 410, Boston MA 02108	votebuilder	\$600
04/07	Printsource	122 Weatherstone Drive, Worcester MA 01604	palm cards	\$324.06
07/14	Printsource	122 Weatherstone Drive, Worcester MA 01604	signs and stakes	\$438.75
07/16	Printsource	122 Weatherstone Drive, Worcester MA 01604	palm cards	\$328.75
08/25	Printsource	122 Weatherstone Drive, Worcester MA 01604	palm cards, signs, and stakes	\$523.81

**SCHEDULE B: EXPENDITURES (continued)**

\* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)	\$3,695.39
Line 14: Expenditures \$50 and under (not listed above)	\$478.90
<b>Line 15: TOTAL EXPENDITURES IN THE PERIOD</b>	<b>\$4174.29</b>

**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 page.*

\* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.

Enter on page 1, line 6 →

**Line 16: In-Kind Contributions over \$50 (or listed above)**

\$0

**Line 17: In-Kind Contributions \$50 and under (not listed above)**

\$0

**Line 18: TOTAL IN-KIND CONTRIBUTIONS 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.*

Enter on page 1, line 7 →

**Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)**

\$0

## 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
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)		\$0	<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i>
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)		\$50	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		\$50	
← Enter on page 1, line 8			Page 8



Commonwealth  
of Massachusetts

CPF ID #:

(For Office Use Only)

## Form CPF D103: Appointment of Depository Bank

Office of Campaign and Political Finance

RECEIVED

WORCESTER CITY CLERK

2025 MAR 27 AM 11:32

Committee Name: Committee to Elect Nelly Medina

Office Sought/District: District E School Committee

Candidate Name: Nelly Medina

Candidate E-Mail: Nelly4districtE@gmail.com

Treasurer Name: Brian Mulhearn

Treasurer E-Mail: bmulhearn@worcester.edu

### ACTIVITY PRIOR TO ESTABLISHING DEPOSITORY BANK ACCOUNT

Please check one

Has the candidate or committee raised or spent money, including the candidate's own funds, received in-kind contributions or incurred liabilities for political purposes prior to establishing this bank account?

Yes: Continue with this form and contact OCPF. A report will be e-filed to disclose this activity.

No: Continue with this form.

I certify that the bank named below has been designated as the depository for campaign funds and I authorize said bank to submit to the Director of the Office of Campaign and Political Finance the reports required by M.G.L. Chapter 55. I agree that all financial activity following the date the bank account is opened shall be conducted through the depository account.

SIGNED UNDER THE PENALTIES OF PERJURY:

Nelly Medina

Signature of Candidate

Date: 2-15-2025

Brian Mulhearn

Signature of Treasurer

Date: 02/15/25

*(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: TD Bank

Date Account Opened: 03-06-25

Phone #: 508-793-5188

E-mail: Cameron.Ceissie@td.com

Bank Mailing Address: 1227 Main St

City / State / Zip: Worcester MA 01603

Date: 03-06-25

Authorized by:

Title: Store Supervisor

Authorized Employee's Signature