



Commonwealth of Massachusetts

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

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Office of Campaign and Political Finance

2018 FEB -9 PM 1:26

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: Tara Donner
 Residential Address: 47 Payson RD
 City / State / Zip: Belmont, MA 02478
 E-Mail Address: tara.donner@gmail.com Phone #: 617 686 1979
 Party Affiliation: _____ (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: Member of the School Committee
 District: Belmont

COMMITTEE: Name of Committee: Committee to Elect Tara Donner
(The name of the committee must include the candidate's last name)
 Committee Mailing Address: 32 Warwick RD
 City / State / Zip: Belmont MA 02478 Phone #: 617 489 6483

OFFICERS:

Chairman: <u>Abigail Donner</u> Residential Address: <u>47 Payson RD</u> City / State / Zip: <u>Belmont MA 02478</u> Phone #: <u>617 6459497</u>	Treasurer*: <u>LAURIE GRAHAM</u> Residential Address: <u>32 WARWICK RD</u> City / State / Zip: <u>BELMONT, MA 02478</u> Phone #: <u>617 489 6483</u> Email: <u>iamlauriegraham@yahoo.com</u>
Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____	Other Officer/Title: _____ 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:

Tara Donner
Candidate's signature

Date: 2/9/18

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:

Laurie Graham
Treasurer's signature

Date: 2.9.18

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Abigail Donner
Chairman's signature

Date: 2/9/18