



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

RECEIVED TOWN CLERK  
GRAFTON, MA

Office of Campaign and Political Finance

2019 APR -2 PM 12:18

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: JENNIFER CONNELLY  
 Residential Address: 26 BAY FARM LN  
 City / State / Zip: SOUTH GRAFTON, MA 01560  
 E-Mail Address: connelly3199@gmail.com Phone #: 508-439-9612  
 Party Affiliation: \_\_\_\_\_ (If applicable)

**OFFICE SOUGHT/PURPOSE:**  
 Title: SCHOOL COMMITTEE  
 District: GRAFTON

**COMMITTEE:** Name of Committee: JENNIFER CONNELLY FOR SCHOOL COMMITTEE  
(The name of the committee must include the candidate's last name)  
 Committee Mailing Address: 26 BAY FARM LN  
 City / State / Zip: SOUTH GRAFTON MA 01560 Phone #: 508-439-9612

<b>OFFICERS:</b>	
<b>Chair:</b> <u>JENNIFER CONNELLY</u> Residential Address: <u>26 BAY FARM LN</u> City / State / Zip: <u>SOUTH GRAFTON MA 01560</u> Phone #: <u>508-439-9612</u>	<b>Treasurer*:</b> <u>ANDREW D. CONNELLY</u> Residential Address: <u>26 BAY FARM LN</u> City / State / Zip: <u>SOUTH GRAFTON MA 01560</u> Phone #: <u>978-460-9913</u> Email: <u>connelly.andrew@gmail.com</u>
<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 MA 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: 4/1/19

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: 4/1/19

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Chair's signature \_\_\_\_\_ Date: 4/1/19