



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with:
City or Town Clerk or Election Commission

CITY CLERK'S OFFICE
LEOMINSTER, MA

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning 1 - 1 - 2015 Ending MARCH 19 2015

Type of report: (Check one)

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

ROBERT A SALVATELLI

Full Name of Candidate (if applicable)

COUNCILOR AT LARGE

Office Sought and District

11 Woodside Ave.

Residential Address

978-537-6557

Tel. No. (optional)

COMMITTEE TO ELECT ROBERT SALVATELLI

Committee Name

LINDA R. SALVATELLI

Name of Committee Treasurer

11 Woodside Ave

Committee Mailing Address

978-537-6557

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 199.90

Line 2: Total receipts this period (page 2, line 11) \$ _____

Line 3: Subtotal (line 1 plus line 2) \$ _____

Line 4: Total expenditures this period (page 3, line 14) \$ 199.90

Line 5: Ending balance (line 3 minus line 4) \$ =

Line 6: Total in-kind contributions this period (page 4) \$ _____

Line 7: Total (all) outstanding liabilities (page 4) \$ _____

Line 8: Name of bank(s) used LEOMINSTER EMPLOYEES FEDERAL CREDIT UNO.

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:

Linda R. Salvatelli
Treasurer's signature (in ink)

3/19/2015
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the 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.

Candidate without Committee OR Candidate with independent activity filing separate report

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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				N/A

Enter on page 1, line 6

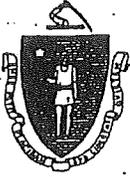
* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Line 18: OUTSTANDING LIABILITIES (ALL)				N/A

Enter on page 1, line 7



Commonwealth of Massachusetts

Form CPF M101 : STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM
Office of Campaign and Political Finance

2015 APR 2 PM 2:41

CITY CLERK'S OFFICE
LEOMINSTER, MA

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

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:

1. Committee Name: Committee to Elect Cody Caisse
(The name of the committee must include the candidate's last name)

2. Committee Address: 35 Barry Lane, Leominster, MA 01453

2a. Mailing Address: 35 Barry Lane, Leominster, MA 01453

3. Purpose: to elect Cody Caisse to a School Committee at large position

	Name	Residential Address	Zip	Tel. No.
4. Officers:				
Chairman:	<u>Sean Vazquez</u>	<u>12 Johnson St, Leom.</u>	<u>01453</u>	<u>575-640-8770</u>
Treasurer:	<u>Patricia Caisse</u>	<u>8 Barry Ln, Leom.</u>	<u>01453</u>	<u>978-798-2203</u>
Other officer:	<u>Cheryl Gallagher</u>	<u>8 Barry Ln, Leom.</u>	<u>01453</u>	<u>508-246-6412</u>
Other officer:	<u>Ann Finch</u>	<u>35 Barry Ln, Leom.</u>	<u>01453</u>	<u>978-847-0305</u>

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: Cody Caisse 8 Barry Ln, Leom. 01453 978-602-6194

	Name	Address	Zip	Tel. No.
6. Office Sought:	<u>School Committee at LARGE</u>	<u>Leominster</u>	<u>01453</u>	<u>Democrat</u>
	Title	District	Party affiliation, if applicable	

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:

Cody Caisse 3/27/15
Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that 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.

SIGNED UNDER THE PENALTIES OF PERJURY:

Patricia A. Caisse 3/27/15
Treasurer's signature Date

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Sean Vazquez 27 Mar 2015
Chairman's signature Date



Commonwealth of Massachusetts

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: Michael D. DellaMonaca

Residential Address: 29 Bicentennial Ave.

City / State / Zip: Leominster MA 01453

E-Mail Address: tellmethebottomline@gmail.com Phone #: 9784133672

Party Affiliation: N/A (If applicable)

OFFICE SOUGHT/PURPOSE:

Title: School Committee

District: Ward 3

2015 AUG 25 AM 8 47

COMMITTEE: Name of Committee: Committee to Elect Michael DellaMonaca
(The name of the committee must include the candidate's last name)

Committee Mailing Address: 982 South St.

City / State / Zip: Fitchburg MA 01420 Phone #: 9784133672

OFFICERS:

Chairman: <u>Amanda E. Goodall</u>	Treasurer*: <u>Christine Ferrara DellaMonaca</u>
Residential Address: <u>21 Parmenter St.</u>	Residential Address: <u>29 Bicentennial Ave.</u>
City / State / Zip: <u>Lunenburg MA 01462</u>	City / State / Zip: <u>Leominster MA 01453</u>
Phone #: <u>9787908547</u>	Phone #: <u>9785496916</u>
Other Officer/Title: _____	Other Officer/Title: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Phone #: _____	Phone #: _____

*A public employee may not serve as treasurer of any political committee (see reverse).

(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:

[Signature] Date: 8/20/15
Candidate's signature

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:

[Signature] Date: 8/23/15
Treasurer's signature

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

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] Date: 8/20/15
Chairman's signature



**Form CPF M101 : STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM**
Office of Campaign and Political Finance

OFFICE
LEMINSTER, MA
2015 AUG 25 AM 9 05

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

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:

1. Committee Name: Heather Mazzaferro Committee to Elect for School Committee
(The name of the committee must include the candidate's last name)

2. Committee Address: 56 Juniper Rd. Leominster, MA 01453

2a. Mailing Address: same

3. Purpose: Campaign

4. Officers:

	<small>Name</small>	<small>Residential Address</small>	<small>Zip</small>	<small>Tel. No.</small>
Chairman:	<u>Heather Mazzaferro</u>	<u>56 Juniper Rd</u>	<u>01453</u>	<u>978-424-8009</u>

Treasurer: Wendy Anderson 19C Crossman Ave 01453 732-692-4566

Other officer: _____

Other officer: _____

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: Heather Mazzaferro 56 Juniper Rd. Leom. 01453 978-424-8009

6. Office Sought: Ward 3 - School Committee

Title District Party affiliation, if applicable

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:

Heather Mazzaferro 8-25-15
Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that 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.

SIGNED UNDER THE PENALTIES OF PERJURY:

Wendy Anderson 8/25/15
Treasurer's signature Date

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Heather Mazzaferro 8-25-15
Chairman's signature Date



Form CPF M101 : STATEMENT OF ORGANIZATION
 CANDIDATE'S COMMITTEE
 MUNICIPAL FORM
 Office of Campaign and Political Finance

OFFICE OF THE CLERK
 LEOMINSTER, MA

2015 SEP 17 AM 9:16

File with:
 City or Town Clerk or Election Commission

Please print or type all information, except signatures

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:

1. Committee Name: Committee to Elect Wendy Wilks
(The name of the committee must include the candidate's last name)

2. Committee Address: 142 Blossom Street, Leominster, MA 01453

2a. Mailing Address: 142 Blossom Street, Leominster, MA 01453

3. Purpose: School Committee election

4. Officers:	Name	Residential Address	Zip	Tel. No.
Chairman:	<u>Nancy Wilks</u>	<u>142 Blossom St</u>	<u>01453</u>	<u>978-534-8729</u>
Treasurer:	<u>Nancy Wilks</u>	<u>142 Blossom St</u>	<u>01453</u>	<u>978-534-8729</u>
Other officer:	_____	_____	_____	_____
Other officer:	_____	_____	_____	_____

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: Wendy Wilks 142 Blossom St 01453 978-870-4338

6. Office Sought:	Name	Address	Zip	Tel. No.
	<u>At Large School Committee</u>	<u>Leominster</u>		
	Title	District	Party affiliation, if applicable	

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:

Nancy A. Wilks September 13, 2015
 Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that 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.

SIGNED UNDER THE PENALTIES OF PERJURY:

Nancy A. Wilks September 13, 2015
 Treasurer's signature Date

I hereby accept the office of Chairman of the above-named committee.
 SIGNED UNDER THE PENALTIES OF PERJURY:

Nancy A. Wilks September 13, 2015
 Chairman's signature Date





**Form CPF M101 : STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM**
Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

2015 SEP 22 AM 11 02

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

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:

1. Committee Name: Committee to Elect Deborah Toivonen
(The name of the committee must include the candidate's last name)

2. Committee Address: 75 Constitution Drive

2a. Mailing Address: 75 Constitution Drive

3. Purpose: Political Campaign

4. Officers:

	Name	Residential Address	Zip	Tel. No.
Chairman:	DEBORAH TOIVONEN	14 MACINTOSH LANE	01453	(978-534-8199)
Treasurer:	Donna Fiduccia	75 Constitution Dr,	01453	(978-534-3566)
Other officer:				
Other officer:				

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: _____

Name	Address	Zip	Tel. No.
_____	_____	_____	_____

6. Office Sought: _____

Title	District	Party affiliation, if applicable
_____	_____	_____

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

I hereby accept the office of treasurer of the above-named committee. I understand that 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.

SIGNED UNDER THE PENALTIES OF PERJURY:

Donna Fiduccia 9/22/15
Treasurer's signature Date

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature Date



Form CPF M101 : STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE

MUNICIPAL FORM

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

2015 SEP 23 PM 2 49

Commonwealth
of Massachusetts

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

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:

- 1. Committee Name: COMMITTEE TO ELECT ANDREA FREEMAN
(The name of the committee must include the candidate's last name)
- 2. Committee Address: 431 PLEASANT ST LEOMINSTER MA 01453
- 2a. Mailing Address: 54 GREEN ST #405 LEOMINSTER MA 01453
- 3. Purpose: SCHOOL COMMITTEE, AT-LARGE - FUNDRAISING
- 4. Officers:

	<small>Name</small>	<small>Residential Address</small>	<small>Zip</small>	<small>Tel. No.</small>
Chairman:	MIRIAM SCAGNETTI	54 Green St,	Leominster MA	01453
Treasurer:	MIRIAM SCAGNETTI	#405		978-534-4965
Other officer:	_____			
Other officer:	_____			

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: ANDREA FREEMAN 431 PLEASANT ST. LEOMINSTER, MA 01453

6. Office Sought: SCHOOL COMMITTEE AT-LARGE

	<small>Name</small>	<small>Address</small>	<small>Zip</small>	<small>Tel. No.</small>

<small>Title</small>	<small>District</small>	<small>Party affiliation, if applicable</small>

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:

[Signature] _____ 9/23/15
Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that 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.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] _____ 9/23/15
Treasurer's signature Date

I hereby accept the office of Chairman of the above-named committee.
SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature Date





Commonwealth of Massachusetts

File with: Director
Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108

CPF ID #: 14794

**Form CPF 101 P: Change of Purpose
Candidate's Political Committee
Office of Campaign and Political Finance**

CITY OF LEAMINGSTER OFFICE
LEAMINGSTER, MA

2015 SEP 30 AM 10 57

(617) 979-8300
(800) 462-OCPP
ocpf@cpf.state.ma.us
<http://www.mass.gov/ocpf>

1. Name of Candidate:

SUSAN Chalifoux Zepheria

2. Office previously held/sought:

MAYOR of Leominster, MASS.

3. Office now sought:

COUNCILLOR AT LARGE, Leominster, MASS.

4. Party (if applicable):

5. Committee:

Committee to Elect Susan Chalifoux Zepheria

Mailing Address: 437 WEST ST

City / State / Zip: Leominster, MA 01453

6. Contact Person:

SUSAN CHALIFOUX ZEPHERIA

Mailing Address: 437 WEST ST

City / State / Zip: LEAMINGSTER, MA 01453

Email: SUECHALIFOUX@VERIZON.NET

Phone #: 978-265-2586

In accordance with the requirements of M.G.L. c. 55, I hereby certify that the above-named political committee is now organized for the purpose stated above.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Treasurer's signature

Date: 9/25/15

[Signature]
Candidate's signature

Date: 9/25/15



Form CPF M101 : STATEMENT OF ORGANIZATION

CANDIDATE'S COMMITTEE CITY CLERK'S OFFICE
MUNICIPAL FORM LEOMINSTER, MA
Office of Campaign and Political Finance

2015 OCT 6 PM 3 03

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

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:

1. Committee Name: COMMITTEE TO ELECT THOMAS ARDINGER
(The name of the committee must include the candidate's last name)

2. Committee Address: 12 NARCISSUS RD, LEOMINSTER, MA 01453

2a. Mailing Address: 12 NARCISSUS RD, LEOMINSTER, MA 01453

3. Purpose: POLITICAL CAMPAIGN

4. Officers:	Name	Residential Address	Zip	Tel. No.
Chairman:	<u>R. THOMAS JONES</u>	<u>112 CHAPMAN PLACE</u>	<u>01453</u>	<u>978-333-9063</u>
Treasurer:	<u>DONNA F. DUCCIA</u>	<u>75 CONSTITUTION DR</u>	<u>01453</u>	<u>978-534-3566</u>
Other officer:				
Other officer:				

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: THOMAS ARDINGER 12 NARCISSUS RD 01453 978-537-4524

6. Office Sought:	Name	Address	Zip	Tel. No.
	<u>CITY COUNCILOR AT LARGE</u>	<u>LEOMINSTER MA</u>		
	Title	District	Party affiliation, if applicable	

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:

Thomas Ardinger 9/25/15
Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that 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.

SIGNED UNDER THE PENALTIES OF PERJURY:

Donna M. Duccia 9-27-15
Treasurer's signature Date

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

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] 9/25/15
Chairman's signature Date