



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: Dorothy S. Pam
 Residential Address: 229 Amity Street
 City / State / Zip: Amherst, MA 01002
 E-Mail Address: dorothypam@sbcglobal.net Phone #: 860 309-6606
 Party Affiliation: _____ (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: Town Councilor
 District: District 3

COMMITTEE: Name of Committee: Dorothy Pam for District 3
(The name of the committee must include the candidate's last name)
 Committee Mailing Address: 229 Amity Street
 City / State / Zip: Amherst MA 01002 Phone #: (860) 309-6606

OFFICERS:

| | |
|--|---|
| Chairman: <u>Maurianne Adams</u> Residential Address: <u>14 Boston St</u> City / State / Zip: <u>Amherst, MA 01002</u> Phone #: <u>413-253-3479</u> | Treasurer*: <u>Barbara Pearson</u> Residential Address: <u>11 Paige St.</u> City / State / Zip: <u>Amherst, MA 01002</u> Phone #: <u>413-256-3435</u> Email: <u>bzpearson@gmail.com</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small> |
| Other Officer/Title: <u>co-chair, Dorothy S. Pam</u> Residential Address: <u>229 Amity Street</u> City / State / Zip: <u>Amherst MA 01002</u> Phone #: <u>(860) 309-6606, (413) 835-0082</u> | 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:

Dorothy S. Pam Date: 7/15/18
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:

Barbara Pearson Date: 7/15/18
Treasurer's signature

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Maurianne Adams Date: 7/15/18
Chairman's signature
co-chair Dorothy S. Pam 7/15/18