



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:	<u>Michele Miller</u>		
	Residential Address:	<u>374 Old Montague Rd</u>		
	City / State / Zip:	<u>Amherst</u>	<u>Ma</u>	<u>01002</u>
	E-Mail Address:	<u>michelemiller3680@gmail.com</u>	Phone #:	<u>413-222-8067</u>
	Party Affiliation:	_____ (If applicable)		
OFFICE SOUGHT/PURPOSE:	Title:	<u>Town Council</u>		
	District:	<u>District 1</u>		

COMMITTEE:	Name of Committee:	<u>Committee to Elect Michele Miller</u>		
		(The name of the committee must include the candidate's last name)		
	Committee Mailing Address:	<u>374 Old Montague Rd</u>		
	City / State / Zip:	<u>Amherst</u>	<u>Ma</u>	<u>01002</u> Phone #: <u>413-222-8067</u>

OFFICERS:

Chairman:	<u>Michele Miller</u>	Treasurer*:	<u>Matthew Andrews</u>
Residential Address:	<u>374 Old Montague Rd</u>	Residential Address:	<u>45 Overlook Drive</u>
City / State / Zip:	<u>Amherst</u> <u>Ma</u> <u>01002</u>	City / State / Zip:	<u>Amherst</u> <u>Ma</u> <u>01002</u>
Phone #:	<u>413-222-8067</u>	Phone #:	<u>413-835-1280</u> Email: <u>matthew@yogacenteramherst.com</u>
Other Officer/Title:	_____	Other Officer/Title:	_____
Residential Address:	_____	Residential Address:	_____
City / State / Zip:	_____	City / State / Zip:	_____
Phone #:	_____	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:

Date: 9/2/21
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:

Date: 9/2/21
Treasurer's signature

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Date: 9/2/21
Chairman's signature