



Commonwealth  
of Massachusetts

# Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE OR 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, organization of a candidate or candidate's committee as follows:

<b>CANDIDATE:</b>	Full Name:	<u>GIGI HOWELL</u>		
	Residential Address:	<u>67 WINTER ST</u>		
	City / State / Zip:	<u>NORTHBOROUGH</u>	<u>MA</u>	<u>01532</u>
	E-Mail Address:	<u>giginowlan@yahoo.com</u>	Phone #:	<u>617.795.6515</u>
	Party Affiliation:	_____ (If applicable)		
<b>OFFICE SOUGHT/PURPOSE:</b>				
Title:		District:		
<input type="checkbox"/> Candidate without committee (check if applicable). If checked, do not complete committee or officer sections: sign as candidate, date and file with clerk or local election official.				

<b>COMMITTEE:</b>	Name of Committee:	<u>K-8 SCHOOL COMMITTEE</u>		
		(The name of the committee must include the candidate's last name)		
	Committee Mailing Address:	_____		
	City / State / Zip:	_____	Phone #:	_____
<b>OFFICERS:</b>				
<b>Chairperson:</b>		<b>Treasurer*:</b>		
Residential Address:		Residential Address:		
City / State / Zip:		City / State / Zip:		
Phone #:		Phone #: Email:		
*A public employee may not serve as treasurer of any political committee (see reverse).				

Additional officers may be listed on page two.

Check applicable box before signing:

☐ Candidate with committee: I hereby 1) consent to this filing; 2) understand that a candidate shall not consent to the organization of more than one account or committee on their behalf; 3) 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; and 4) may not serve as treasurer of a political committee organized on my behalf.

☒ Candidate without committee: I hereby 1) consent to this filing; 2) understand that a candidate shall not consent to the organization of more than one account or committee on their behalf; 3) acknowledge if I become a public employee I must organize a committee and may not serve as treasurer; and 4) 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:

Gigi Howell  
Candidate's signature

Date: 28MAR23

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 their behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature

Date: \_\_\_\_\_

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairperson's signature

Date: \_\_\_\_\_



Commonwealth  
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# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 20 MAR 23 Ending Date: 09 MAY 23

Type of Report: (Check one)

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

<u>GIGI LISA HOWELL</u>	
Candidate Full Name (if applicable)	
<u>SCHOOL COMMITTEE</u>	
Office Sought and District	
<u>67 WINTER ST NORTHBOROUGH</u>	
Residential Address	
E-mail:	<u>giginowlan@yahoo.com</u>
Phone # (optional):	<u>617.795.6515</u>

<u>K-8 SCHOOL COMMITTEE</u>	
Committee Name	
Name of Committee Treasurer	
Committee Mailing Address	
E-mail:	
Phone # (optional):	

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>530</u>
Line 3: Subtotal (line 1 plus line 2)	<u>530</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>530</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>1</u>

### 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: \_\_\_\_\_ (Treasurer's signature) Date: \_\_\_\_\_

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with 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 that are not otherwise disclosed in this report.

#### Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 28 MAR 23

## SCHEDULE B: EXPENDITURES

*M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.*

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
16 MAR 23	CICI HOWELL 67 WINTER ST	67 WINTER ST NORTHBOROUGH MA	YARD SIGNS VISTA PRINT(YARD)	530
			Line 12: Total Expenditures over \$50 (or listed above)	
			Line 13: Total Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	530

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

**SCHEDULE B: EXPENDITURES (continued)**[illegible]

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## 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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				