

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE

MUNICIPAL FORM

2015 OCT 26 AM11:54 BARNSTABLE TOWN CLERK

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

Residential Address: 82 Keyeney Lane (444) City/State/Zip: Cummaquid MA 02637 E-Mail Address: FLOVES & VSDLA. Ovg Phone #: 617-686-66 OFFICE SOUGHT/PURPOSE: Title: Town Councilor District: Parn Stable Precinct One COMMITTEE: Name of Committee: City/State/Zip: Cummaquid MA 07631 Phone #: 617-686-66 OFFICERS: Chairman: Fran Manzelli Residential Address: 74 Sundaya Hill Dr. City/State/Zip: W. Barn Stable MA 01660 Phone #: 506.315.3331 Cher Officer/Title: Other Officer/Title: Residential Address: Res	CANDIDATE:	Full Name:	John G.	FLOVES
E-Mail Address: Party Affiliation: OFFICE SOUGHT/PURPOSE: Title: District: Davn Stable Precinct One COMMITTEE: Name of Committee: Committee Mailing Address: City / State / Zip: Phone #: 500.715.7357 City / State / Zip: Phone #: 500.716.71tle: Residential Address: Cother Officer/Title: Residential Address: Residential Address: Cother Officer/Title: Residential Address: Residential Address: Cother Officer/Title: Residential Address: Cother Officer/Title: Residential Address: Residential Address: Cother Officer/Title: Residential Address:		Residential Address:	83 Kever	
Party Affiliation: OFFICE SOUGHT/PURPOSE: Title: District: District: Darn stable Precinct One COMMITTEE: Name of Committee: Committee Mailing Address: City / State / Zip: City / State / Zip: Phone #: District: Town Gunt Gunt Gunt Gunt Gunt Gunt Gunt Gun		City / State / Zip:		UID MA 02637
OFFICE SOUGHT/PURPOSE: Title: District: Town stable Precinct One COMMITTEE: Name of Committee: Committee Mailing Address: Committee Mailing Address: P.O. Box. 444 City/State/Zip: Commaquid Manuelli Residential Address: Fran Manuelli Residential Address: District: Town Gunday Gampayan Fund (The name of the committee must include the candidate's last name) P.O. Box. 444 City/State/Zip: Commaquid Manuelli Residential Address: Fran Manuelli Residential Address: Chairman: Residential Address: Fran Manuelli Residential Address: City/State/Zip: Phone #: 508.715.7361 Treasurer*: Residential Address: City/State/Zip: Phone #: 508.716.7141 Other Officer/Title: Residential Address: Residential Address:		E-Mail Address:	J FLOVES ON	FLOVES @ USDLA. Org Phone #: 617-686-6916 (If applicable)
Title: TOWN COUNCILOR District: Parn Stable Precinct One COMMITTEE: Name of Committee: John G. Flores Campaign Fund (The name of the committee must include the candidate's last plane) Committee Mailing Address: P.O. Box. 444 City/State/Zip: Cummaguid MA 07431 Phone #: 611-686-69 OFFICERS: Chairman: Fran Manzelli Residential Address: 59 Jane Wall Dr. City/State/Zip: W. Barn Stable MA 01660 Phone #: 508-316-3362 Other Officer/Title: Other Officer/Title: Residential Address: Residential Address: Residential Address:		Party Affiliation:		
COMMITTEE: Name of Committee: Committee Mailing Address: City/State/Zip: Chairman: Residential Address: Phone #: 506.315.332 Other Officer/Title: Residential Address: Committee Mailing Address: Commaguid Treasurer*: Residential Address: Treasurer*: Residential Address: Phone #: 506.315.332 Apublic employee may not serve as treasurer of any political committee (see Forter) Other Officer/Title: Residential Address:	OFFICE SOUG	HT/PURPOSE:		
COMMITTEE: Name of Committee: Committee Mailing Address: City / State / Zip: City / State	The same of	Title: Town Councilor		
Committee Mailing Address: City / State / Zip: Chairman: Residential Address: Phone #: 506.715-7352 City / State / Zip: Phone #: 506.715-7352 City / State / Zip: City /		District: Barn Stabl		: Precinct One
A public employee may not serve as treasurer of any political committee (see r Other Officer/Title: Residential Address: Residential Address:	Chairman: Residential Address: City / State / Zip:	City / State / Zip:	Commac Lelli Wall Dr.	Treasurer: Penney K. Hensley Residential Address: 34 Sundy HII Dr. City/State/Zip: Parastable, MA. 02630
Residential Address: Residential Address:			1170	*A public employee may not serve as treasurer of any political committee (see reve
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City / State / Zip:	_			
Phone #: Phone #: (Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)	Phone #:	/C1-t1	-H-1-ECDEM A 101 'G-	

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. 53, 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.

Candidate's signature

SIGNED UNDER THE PENALTIES OF PERJURY:

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

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature