



Form CPF M101: STATEMENT OF ORGANIZATION

CANDIDATE'S COMMITTEE

MUNICIPAL FORM

Office of Campaign and Political Finance

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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:	Laura Ciaramicoli Ingemi		
	Residential Address:	39 Woodridge Rd		
	City / State / Zip:	Milford	MA	01757
	E-Mail Address:	lmciamram@gmail.com	Phone #:	774-573-0740
	Party Affiliation:	(If applicable)		
OFFICE SOUGHT/PURPOSE:	Title:	School Committee		
	District:	Milford		

COMMITTEE:	Name of Committee:	Committee to Elect Laura Ciaramicoli Ingemi		
		(The name of the committee must include the candidate's last name)		
	Committee Mailing Address:	5 Esther Dr		
	City / State / Zip:	Milford	MA	01757
		Phone #:	774-573-0774	

OFFICERS:

Chairman:	Gayle Ciaramicoli	Treasurer*:	Joshua Ingemi
Residential Address:	5 Esther Dr	Residential Address:	39 Woodridge Rd
City / State / Zip:	Milford MA 01757	City / State / Zip:	Milford MA 01757
Phone #:	774-573-0774	Phone #:	617-750-1748
		Email:	joshua.ingemi@gmail.com
		*A public employee may not serve as treasurer of any political committee (see reverse).	
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:

[Signature]
Candidate's signature

Date: 1/30/18

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]
Treasurer's signature

Date: 1/28/18

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

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Chairman's signature

Date: 1/28/18



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: 2/5/18 Ending Date: 3/26/18

Type of Report: (Check one)

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

Laura M. Ciaramicoli Ingeni
Candidate Full Name (if applicable)
School Committee
Office Sought and District
39 Woodbridge Rd. Milford, MA
Residential Address
E-mail: lmciam@ gmail.com
Phone # (optional): 774-573-1740

Committee to Elect Laura Ciaramicoli
Committee Name
Joshua Ingeni
Name of Committee Treasurer
39 Woodbridge Rd. Milford, MA
Committee Mailing Address
E-mail: joshua.ingeni@gmail.com
Phone # (optional): 617-950-1748

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>6,150.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>6,150.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>3,060.64</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>3,089.36</u>
Line 6: Total in-kind contributions this period (page 6)	<u>250.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>3,000.00</u>
Line 8: Name of bank(s) used:	<u>The Milford National Bank & Trust</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: [Signature] (Treasurer's signature)

Date: 3/26/18

FOR CANDIDATE FILINGS ONLY: 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: [Signature] (Candidate's signature)

Date: 3/26/18

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/5/18	Gayle Ciaramicoli 5 Esther Dr. Milford	\$500	Retired
3/3/18	Philip Ciaramicoli 5 Esther Dr. Milford	\$100	
3/3/18	Judith Dagnese 25 Hamilton Ave. Milford	\$100	
3/3/18	Jeannie Fitzpatrick 17 Tillson Circle Milford	\$74	
2/5/18	Laura Ingemi 39 Woodridge Rd. Milford		teacher town of Hopedale
2/26/18	Laura Ingemi 39 Woodridge Rd. Milford	\$1,000	teacher town of Hopedale
3/3/18	Kerin Lobisser 31 Whitewood Rd. Milford	\$200	President Lobisser Building Corp.
3/3/18	Linda Lyrist 33 Janock Rd. Milford	\$55	
3/3/18	Kerin Meehan 8-18 Uxbridge Rd. Mendon	\$300	owner Imperial Cars Inc.
3/3/18	Joseph Morais 21 Roland Way Milford	\$100	
3/3/18	Paul Pellegrini 45 Woodridge Rd. Milford	\$100	
3/3/18	David Pyne 15 Whispering Pines Dr. Milford	\$200	Contractor Self-Employed

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

4,979

Line 10: Total Receipts \$50 and under* (not listed above)

1,171

Line 11: TOTAL RECEIPTS IN THE PERIOD

6,150

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

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
12/12/18				
2/28/18	(Mittford Daily News) Gothouse Media	197 Main St. Mittford, MA	newspaper ad	\$230.60
3/5/18	My FM Media	258 Main St. Mittford, MA	radio ad	\$115.20
12/12/18				
3/3/18	Italian Vets	4 Hayward Field Mittford, MA	rental room fee	\$175.00
2/12/18	Signs Plus	50th Main St. Mittford, MA	signs	\$549.84
3/7/18	Signs Plus	50th Main St. Mittford, MA	signs	\$442.00
2/16/18	Town Crier	48 Mechanic St. Upton, MA	newspaper ad	\$511.00
3/2/18	Town Crier	48 Mechanic St. Upton, MA	newspaper ad	\$511.00
3/15/18	Town Crier	48 Mechanic St. Upton, MA	newspaper ad	\$511.00
Line 12: Total Expenditures over \$50 (or listed above)				3,045.64
Line 13: Total Expenditures \$50 and under* (not listed above)				15.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$ 3,060.64

* 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 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 6 on page 1.

[illegible]

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) \$ 3,000.00