



Commonwealth  
of Massachusetts

# Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE OR CANDIDATE'S COMMITTEE MUNICIPAL FORM

## Office of Campaign and Political Finance

HAV CITY CLERK FEB 22/23 PM 9:37

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>Lynette J. Hickey</u>       |           |                          |
|                               | Residential Address:  | <u>74 Wheeler Ave</u>          |           |                          |
|                               | City / State / Zip:   | <u>Haverhill</u>               | <u>MA</u> | <u>01832</u>             |
|                               | E-Mail Address:   | <u>lynetteforhsc@gmail.com</u> | Phone #:  | <u>978-308-2152</u>      |
|                               | Party Affiliation:  | _____ (If applicable)          |           |                          |
| <b>OFFICE SOUGHT/PURPOSE:</b> |   |                                |           |                          |
|                               | Title:  | <u>School Committee</u>        | District: | <u>Haverhill, Ward 5</u> |
|                               | <input checked="" 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:         | _____  |          |       |
|   |                            | (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:

Lynette J. Hickey  
Candidate's signature

Date: 02/21/23

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: \_\_\_\_\_