



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Amended

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 12/31/2020

Type of Report: (Check one)

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

Jerron V. Kamae
Candidate Full Name (if applicable)

School Committee
Office Sought and District

10 Roath St. Worcester, MA
Residential Address

E-mail: _____

Phone # (optional): _____

Worcester School Committee
Committee Name

Desmond Kamae
Name of Committee Treasurer

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$ 58.00
Line 2: Total receipts this period (page 3, line 11)	2471.00
Line 3: Subtotal (line 1 plus line 2)	2529.00
Line 4: Total expenditures this period (page 5, line 14)	536.00
Line 5: Ending Balance (line 3 minus line 4)	\$ 1993.00
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	

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: 2-12-2021

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: 2-12-2021

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)
12/10/2020	Ambrose Toekulah, 159 Austin St. Worcester MA 1609	\$40.00	Human Service, Seven Hills Foundation
12/06/2020	Anne Marie Lucci, PO Box 16145 Worcester MA 01601	\$25.00	Not Employed
10/11/2020	Carmen Negron, 114 Elm St. 1 Worcester MA 1609	\$25.00	Health Educator, Planned Parenthood League of Massachusetts
10/07/2021	CTE John Mahoney 138 Newton Avenue North Worcester MA 1609	\$100.00	State Representative, Commonwealth of Massachusetts
01/09/2020	David Rynick 1030 Pleasant St Worcester MA 01602-1334	\$50.00	Life Coach, David Rynick
10/27/2020	Garcon Morweh, 4601 S. Cottage Grove Ave 53553 Chicago IL 60653	\$50.00	N/A
11/27/2020	Garcon Morweh, 4601 S. Cottage Grove Ave 53553 Chicago IL 60653	\$50.00	N/A
12/27/2020	Garcon Morweh, 4601 S. Cottage Grove Ave 53553 Chicago IL 60653	\$50.00	N/A
12/06/2020	Harvey Gould, 35 Saxon Rd. Worcester MA 01602-1544	\$ 36	Not Employed
01/09/2021	Harvey Gould, 35 Saxon Rd. Worcester MA 01602-1544	\$ 35	Not Employed
09/25/2020	James Leary, 25 Tattan Farm Rd Worcester MA 1605	\$100.00	Vice Chancellor UMass Medical School
12/14/2020	Janet Davis, P. O. Box 472 Millville MA 1529	\$25.00	Administrative Assistant, Advocates Inc.
Line 9: Total Receipts over \$50 (or listed above)		\$200.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$ 386.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$586.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/09/2020	Jason Kahura 10 Rutledge St Worcester MA 01604	\$ 50.00	Counselor, WPS
12/09/2020	Jibrael Younis 531 Main St. 408M Worcester MA 01608	\$50.00	Social Worker, MassHire
09/23/2020	Joseph Asafu-Adjaye 384 Sunderland Road Apt 10A Worcester MA 01604 United States	\$50.00	Facilities, WPI
12/30/2020	Joyce McNickles, 204 Putnam Hill Road Sutton MA 1590	\$100.00	Educator\Consultant
12/13/2020	Kathy Chen, 95 Monadnock Road Worcester MA 01609	\$100.00	Director, WPI
12/09/2020	Kimberly Rogers 145 Front St UNIT 1417 Worcester MA 01608	\$30.00	Teacher, Bancrot School
10/10/2020	Kinshasa Stevenson-Mays 93 Grand St Worcester MA 01610	\$15.00	Accounts Payable Clerk, Cumberland Farms
12/09/2020	Laurel Hemmer, 36 Stoneybrook Rd. Charlton MA 1507	\$20.00	Social Worker, McManus Counseling
12/09/2020	Lydia Proulx, 35 Wabash Ave Worcester MA 01604	\$10.00	Youth Program Coordinator, Youth MOVE National
12/09/2020	Margot Barnet, 121 Glendale St Worcester MA 1602	\$50.00	Chiropractor, Self Employed
12/09/2020	Mariama Congo 11 Village Ln Berlin MA 1503	\$50.00	Not Employed
12/09/2020	Maseeng Masitha 112 Woodland Street Worcester MA 01610	\$10.00	Not Employed
12/09/2020	Megan Gutwillig, 378 Sunderland Road #28 Worcester MA 1604	\$15.00	Veterinary Student/tech Cummings School of Vet Med
Line 9: Total Receipts over \$50 (or listed above)		\$200	
Line 10: Total Receipts \$50 and under* (not listed above)		\$350	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$550	← 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

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)
12/09/2020	Melissa Hutchins 30 Rice Lane Unit 12 Worcester MA 1604	\$25.00	Teacher, Worcester Academy
12/09/2020	Michael Houldsworth, 145 Front St Unit 1417, Worcester MA 1608	\$30.00	Engineer, Havard Bioscience
12/15/2020	Michael Lanava 877 Grove Street Ter Worcester MA 1605	\$150.00	Manager, MSLC
12/27/2020	Natasha Stutsman-Hubbell 212 T St NE Apt 3 Washington DC 20002	\$50.00	Not employed
12/13/2020	Nathaniel Needle, 151 SHREWSBURY ST. Apt. 5, WORCESTER MA 1604	\$200.00	Piano Teacher
10/18/2020	Paul DePalo 7 Underwood Street Worcester MA 1602	\$50.00	Attorney, Self
10/28/2020	Richard Schmitt 65 Tory Fort Lane Worcester MA 1602	\$40.00	Not Employed
12/17/2020	Robyn Kennedy, 184 Saint Nicholas Ave Worcester MA 1606	\$100.00	Associate Executive Director YWCA Central Massachusetts
12/09/2020	Sean Parretti-Noone, 405 Bridle Path Worcester MA 1604	\$100.00	Not Employed
12/09/2020	Seth Nadeau 3 Cedar Street Apt. 22 Worcester MA 1609	\$25.00	Political Director, McGovern Committee
10/09/2020	Stacey Luster 120 Cataract St Worcester MA 1602	\$50.00	Asst VP, Worcester State University
10/13/2020	Susan Mailman 24 holden st worcester MA 1605	\$50.00	
Line 9: Total Receipts over \$50 (or listed above)		\$550.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$320.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$870.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/09/2020	Tara Arthur 58 Whisper Dr Worcester MA 1609	\$15.00	Organizer, SEIU
10/07/2020	Mr & Mrs. Robert Mecca, 379 School st. Boylston, Ma 01505	\$50.00	N/A
10/20/2020	Michael Madden , 866 Main st., #10 Worcester, Ma 01610	\$100.00	Retired
10/23/2020	Lucy M. Candib, 65 Fort Lane, Worcester, Ma 01602	\$100.00	MD
08/29/2020	Tim Murray	\$200.00	CEO & President, Worcester Chamber of Commerce
Line 9: Total Receipts over \$50 (or listed above)		\$400	
Line 10: Total Receipts \$50 and under* (not listed above)		\$65	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$465	← 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
11/18/20	Go Daddy Domain Website + Marketing Basil 2-4-20	14455 N. Hayden Rd, Ste 219, Scottsdale, AZ	Campaign website	\$273.44
09/18/20	Postal Stamps	41 E Central St., Worcester, MA 01604	For mailing of letters - campaign re-election	\$250.67
09/18/20	Envelope	25 Tobias Blend Way, Worcester, MA	For mailing of letters - campaign reception	\$11.89
Line 12: Total Expenditures over \$50 (or listed above)				524.11
Line 13: Total Expenditures \$50 and under* (not listed above)				\$11.89
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$536.00

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

Page 4

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 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount

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



Commonwealth of Massachusetts

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: 1/1/2020 Ending Date: 12/31/2020

Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Jermoh Kamara
Candidate Full Name (if applicable)

Worcester School Committee
Office Sought and District

10 Roath St. Worcester, Ma 01604
Residential Address

Telephone Number (optional): _____

Committee To Elect Jermoh Kamara
Committee Name

Desmond Kamara
Name of Committee Treasurer

10 Roath St. Worcester, Ma 01604
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$58.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2471.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2529.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>536.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$1993.00</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>Berkshire Bank</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: 1/20/2021

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: 1/20/2021

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)
12/10/2020	Ambrose Toekulah, 159 Austin St. Worcester MA 1609	\$40.00	Human Service, Seven Hills Foundation
12/06/2020	Anne Marie Lucci, PO Box 16145 Worcester MA 01601	\$25.00	Not Employed
10/11/2020	Carmen Negron, 114 Elm St. 1 Worcester MA 1609	\$25.00	Health Educator, Planned Parenthood League of Massachusetts
10/07/2021	CTE John Mahoney 138 Newton Avenue North Worcester MA 1609	\$100.00	State Representative, Commonwealth of Massachusetts
01/09/2020	David Rynick 1030 Pleasant St Worcester MA 01602-1334	\$50.00	Life Coach, David Rynick
10/27/2020	Garcon Morweh, 4601 S. Cottage Grove Ave 53553 Chicago IL 60653	\$50.00	N/A
11/27/2020	Garcon Morweh, 4601 S. Cottage Grove Ave 53553 Chicago IL 60653	\$50.00	N/A
12/27/2020	Garcon Morweh, 4601 S. Cottage Grove Ave 53553 Chicago IL 60653	\$50.00	N/A
12/06/2020	Harvey Gould, 35 Saxon Rd. Worcester MA 01602-1544	\$ 36	Not Employed
01/09/2021	Harvey Gould, 35 Saxon Rd. Worcester MA 01602-1544	\$ 35	Not Employed
09/25/2020	James Leary, 25 Tattan Farm Rd Worcester MA 1605	\$100.00	Vice Chancellor UMass Medical School
12/14/2020	Janet Davis, P. O. Box 472 Millville MA 1529	\$25.00	Administrative Assistant, Advocates Inc.
Line 9: Total Receipts over \$50 (or listed above)		\$200.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$386.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$586.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/09/2020	Jason Kahura 10 Rutledge St Worcester MA 01604	\$ 50.00	Counselor, WPS
12/09/2020	Jibrael Younis 531 Main St. 408M Worcester MA 01608	\$50.00	Social Worker, MassHire
09/23/2020	Joseph Asafu-Adjaye 384 Sunderland Road Apt 10A Worcester MA 01604 United States	\$50.00	Facilities, WPI
12/30/2020	Joyce McNickles, 204 Putnam Hill Road Sutton MA 1590	\$100.00	Educator\Consultant
12/13/2020	Kathy Chen, 95 Monadnock Road Worcester MA 01609	\$100.00	Director, WPI
12/09/2020	Kimberly Rogers 145 Front St UNIT 1417 Worcester MA 01608	\$30.00	Teacher, Bancrot School
10/10/2020	Kinshasa Stevenson-Mays 93 Grand St Worcester MA 01610	\$15.00	Accounts Payable Clerk, Cumberland Farms
12/09/2020	Laurel Hemmer, 36 Stoneybrook Rd. Charlton MA 1507	\$20.00	Social Worker, McManus Counseling
12/09/2020	Lydia Proulx, 35 Wabash Ave Worcester MA 01604	\$10.00	Youth Program Coordinator, Youth MOVE National
12/09/2020	Margot Barnet, 121 Glendale St Worcester MA 1602	\$50.00	Chiropractor, Self Employed
12/09/2020	Mariama Congo 11 Village Ln Berlin MA 1503	\$50.00	Not Employed
12/09/2020	Maseeng Masitha 112 Woodland Street Worcester MA 01610	\$10.00	Not Employed
12/09/2020	Megan Gutwillig, 378 Sunderland Road #28 Worcester MA 1604	\$15.00	Veterinary Student/tech Cummings School of Vet Med
Line 9: Total Receipts over \$50 (or listed above)		\$200	
Line 10: Total Receipts \$50 and under* (not listed above)		\$350	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$550	← 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

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)
12/09/2020	Melissa Hutchins 30 Rice Lane Unit 12 Worcester MA 1604	\$25.00	Teacher, Worcester Academy
12/09/2020	Michael Houldsworth, 145 Front St Unit 1417, Worcester MA 1608	\$30.00	Engineer, Havard Bioscience
12/15/2020	Michael Lanava 877 Grove Street Ter Worcester MA 1605	\$150.00	Manager, MSLC
12/27/2020	Natasha Stutsman-Hubbell 212 T St NE Apt 3 Washington DC 20002	\$50.00	Not employed
12/13/2020	Nathaniel Needle, 151 SHREWSBURY ST. Apt. 5, WORCESTER MA 1604	\$200.00	Piano Teacher
10/18/2020	Paul DePalo 7 Underwood Street Worcester MA 1602	\$50.00	Attorney, Self
10/28/2020	Richard Schmitt 65 Tory Fort Lane Worcester MA 1602	\$40.00	Not Employed
12/17/2020	Robyn Kennedy, 184 Saint Nicholas Ave Worcester MA 1606	\$100.00	Associate Executive Director YWCA Central Massachusetts
12/09/2020	Sean Parretti-Noone, 405 Bridle Path Worcester MA 1604	\$100.00	Not Employed
12/09/2020	Seth Nadeau 3 Cedar Street Apt. 22 Worcester MA 1609	\$25.00	Political Director, McGovern Committee
10/09/2020	Stacey Luster 120 Cataract St Worcester MA 1602	\$50.00	Asst VP, Worcester State University
10/13/2020	Susan Mailman 24 holden st worcester MA 1605	\$50.00	
Line 9: Total Receipts over \$50 (or listed above)		\$550.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$320.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$870.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/09/2020	Tara Arthur 58 Whisper Dr Worcester MA 1609	\$15.00	Organizer, SEIU
10/07/2020	Mr & Mrs. Robert Mecca, 379 School st. Boylston, Ma 01505	\$50.00	N/A
10/20/2020	Michael Madden , 866 Main st., #10 Worcester, Ma 01610	\$100.00	Retired
10/23/2020	Lucy M. Candib, 65 Fort Lane, Worcester, Ma 01602	\$100.00	MD
08/29/2020	Tim Murray	\$200.00	CEO & President, Worcester Chamber of Commerce
Line 9: Total Receipts over \$50 (or listed above)		\$400	
Line 10: Total Receipts \$50 and under* (not listed above)		\$65	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$465	← 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/18/2020	Go Daddy Domain, Website, + Marketing Basic 2-years plan	14455 N. Hayden Rd, Ste. 219, Scottsdale, AZ	Campaign website	\$273.44
09/18/2020	Postal Stamps	4 E Central St, Worcester, MA 01604	For the mailing of letters for re-introduction to 2021 campaign	\$110
09/18/2020	Envelopes	25 Tobias Boland Way, Worcester, MA	For the mailing of letters	\$11.89
Line 12: Expenditures over \$50 (or listed above)				\$383.44
Line 13: Expenditures \$50 and under* (not listed above)				\$11.89
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$395.33

Enter on page 1, line 4 →

* 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 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Received
Worcester City Clerk

2020 FEB -4 8:22

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/29/2019 Ending Date: 12/31/19

Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

JERMOH KAMARA
Candidate Full Name (if applicable)
School COMMITTEE - WORCESTER
Office Sought and District
10 Roath St WORC MA 01604
Residential Address
E-mail: _____
Phone # (optional): _____

Committee To Elect Jermoh KAMARA
Committee Name
DESMOND A. KAMARA
Name of Committee Treasurer
10 ROATH ST WORC MA 01604
Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	1,885.76
Line 2: Total receipts this period (page 3, line 11)	1,190.0
Line 3: Subtotal (line 1 plus line 2)	3,075.76
Line 4: Total expenditures this period (page 5, line 14)	3,017.76
Line 5: Ending Balance (line 3 minus line 4)	58.00
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	

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: 1-28-20

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: 1-28-2020

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)
11/03/2019	Gloria Hall 115 Beeching Street Worcester, MA 01602	35	
11/10/2019	Robyn Kennedy 184 Saint Nicholas Ave Worcester, MA 01606	100	Associate Executive Director YWCA, Central Massachusetts rkennedy926@gmail.com 7747396716
11/04/2019	Robert Jennings 3 Saffron Drive Worcester, MA 01605	100	Worc Pub School rejennings11@gmail.com 7743171911
11/03/2019	Matt Delayee 2012 Golden Creek Ln Richmond, TX 77469	50	mdelayee@Gmail.com
11/02/2019	Lucy Candib 65 Tory Fort Lane Worcester, MA 01602	100	lcandib@massmed.org 508-757-0814
11/02/2019	Erin Derr 21 Drexel Street Worcester, MA 01602	25	erinederr@gmail.com 5083207119
11/02/2019	Anthony Athy 34 Berwick St. Worcester, MA 01602	50	tonyathy@msn.com
11/02/2019	Kevin Kane 38 Lake Avenue Spencer, MA 01562	25	kevin.kane0@gmail.com 6465101171 Adjunct Professor worcester state university
11/01/2019	Eleanor Gilmore 7 Harvard St #3 Worcester, MA 01609	25	eleanorbgilmore@gmail.com 8147771606
11/01/2019	Celia Blue 19 Liberty St Worcester, MA 01605	100	Self Employed BlueStone Masonry cj_blue@hotmail.com 5087995743
10/31/2019	Cara Berg Powers 18 Townsend Street Worcester, MA 01609	10	Executive Director Transformative Culture Project caralisapowers@gmail.com 5089818877
	Paul DePalo 7 Underwood Street Worcester, MA 01602	25	Attorney pdepalo@gmail.com 5082158894
Line 9: Total Receipts over \$50 (or listed above)		400	
Line 10: Total Receipts \$50 and under* (not listed above)		245	
Line 11: TOTAL RECEIPTS IN THE PERIOD		645	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/29/2019	James Leary 25 Tattan Farm Rd Worcester, MA 01605	100	Vice Chancellor UMass Medical School jamesleary@gmail.com +
10/29/2019	Mark Mancevice	50	Not Employed mmancevi@verizon.net 5087980079
10/29/2019	Marilyn Butler 50 Wildrose Avenue Worcester, MA 01602	25	Teacher - Bancroft School maributler@aol.com 5087980079
10/29/2019	Sean Parretti-Noone 405 Bridle Path Worcester, MA 01604 +	100	Not Employed seanmpn@gmail.com
10/29/2019	Gloria Hall 115 Beeching Street Worcester, MA 01602	35	Not Employed Public Art Administrtor gd5hall@hotmail.com 508-755-1620 +
10/29/2019	Sandy Ellis 12 County St Worcester, MA 01604	200	Community Organizer Massachusetts Nurses Association sellis@mnarn.org 7813630020 +
10/29/2019	Harvey Gould 35 Saxon Rd. Worcester, MA 01602	35	Not Employed harvey.gould@gmail.com
Line 9: Total Receipts over \$50 (or listed above)		400	
Line 10: Total Receipts \$50 and under* (not listed above)		145	
Line 11: TOTAL RECEIPTS IN THE PERIOD		545	← 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
11/21/2019	Campaigns That Win.com	210 Park Ave Worcester, MA 01609 US 508-667-6365	Hand outs 6x9 - 4/4 " Joint Support w/ Etal" Print - PALMCARDS 4X9 340 n 25 85 nnt	90.31
11/14/2019	Campaigns That Win.com	210 Park Ave Worcester, MA 01609 US 508-667-6365	7 "X10.5" postcard mailing services -	1,770
11/07/2019	CSC Solutions	2 Brandish Rd Farm Upton, MA 01568	LeBoeuf robocall	75
12/02/2019	FACEBook		Facebook campaign	13.46
12/10/2019	Textedly		Mass campaign reminder when to vote	20
12/13/2019	Walmart		Thank you cards	16.94
12/12/2019	CSC Solutions Check # 1012	2 Brandish Rd Farm Upton, MA 01568	Robocall	150
12/19/2019	USPS		Shipping - Thank you cards	23.65
12/13/2019	other misc spending			858.4
Line 12: Total Expenditures over \$50 (or listed above)				2,943.71
Line 13: Total Expenditures \$50 and under* (not listed above)				74.05
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,017.76

* 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

	Line 12: Expenditures over \$50 (or listed above)	
--	--	--

	Line 13: Expenditures \$50 and under* (not listed above)	
--	---	--

Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITURES IN THE PERIOD	
---------------------------	--	--

* 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 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-Kind Contributions over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			



Commonwealth of Massachusetts

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: 10/29/2019 Ending Date: _____

Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Candidate Full Name (if applicable) _____
Office Sought and District _____
Residential Address _____
E-mail: _____
Phone # (optional): _____

Committee Name _____
Name of Committee Treasurer _____
Committee Mailing Address _____
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,885.76
Line 2: Total receipts this period (page 3, line 11)	1,190
Line 3: Subtotal (line 1 plus line 2)	3,075.76
Line 4: Total expenditures this period (page 5, line 14)	3,017.76
Line 5: Ending Balance (line 3 minus line 4)	58
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	

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: _____ (Candidate's signature) Date: _____



Commonwealth of Massachusetts

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: 09/05/2019 Ending Date: 10/28/2019

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

JERMOH KAMARA
 Candidate Full Name (if applicable)
 SCHOOL COMMITTEE - CITY OF WORCESTER
 Office Sought and District
 10 ROATH ST; WORCESTER, MA 01604
 Residential Address
 E-mail: ELECTJERMOHKAMARA@GMAIL.COM
 Phone # (optional): _____

COMMITTEE TO ELECT JERMOH KAMARA
 Committee Name
 DESMOND KAMARA
 Name of Committee Treasurer
 10 ROATH ST; WORCESTER, MA 01604
 Committee Mailing Address
 E-mail: DESMOND@ALL-NATIONSINSURANCE.COM
 Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	517.76
Line 2: Total receipts this period (page 3, line 11)	3,010
Line 3: Subtotal (line 1 plus line 2)	3,527.76
Line 4: Total expenditures this period (page 5, line 14)	1,642
Line 5: Ending Balance (line 3 minus line 4)	1,885.76
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	2,933
Line 8: Name of bank(s) used:	BERKSHIRE BANK

2019 OCT 29 PM 4:59
 City of Worcester
 Campaign Finance Office

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: 10/28/19

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: 10/28/19

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)
9/14/2019	Lucy Candib 65 Tory Fort Lane Worcester MA 01602	100	
10/23/2019	Lucy Candib 65 Tory Fort Lane Worcester MA 01602	50	
10/22/2019	Linda Cavaiofi 1 Salem Square Worcester MA 1609	250	Director YWCA Central Mass. United States Executive Director YWCA Central Mass.
9/20/2019	Daniel Donahue 39 Forsberg Street Worcester MA 01607	100	
10/06/2019	Patricia Feraud 145 University Drive #3628 Amherst MA 01002	10	Graduate Assistant UMass Amherst
10/08/2019	Emma Gardner 4 Winfield St Dedham MA 02026	75	Educator Noneya
10/24/2019	isabel gonzalez 23 Ferdinand Street Worcester MA 01603	25	Organizing Coordinator SEIU Local 509
09/23/2019	Devon Grilly 31 Mellen St Hopedale MA 01747	25	
10/27/2019	Etel Haxhijaj 4 Englewood Worcester MA 01603	100	Community Organizer Mothers Out Front
10/08/2019	Hugh Joseph 676 Hammond St. CHESTNUT HILL MA 02467	100	Professor Tufts University
10/27/2019	Jane Leidel 5 Berwick Lane Worcester MA 01602	50	
10/07/2019	Deborah Levine 35 Eames Street Providence RI 2906	25	Professor Providence College
Line 9: Total Receipts over \$50 (or listed above)		725	
Line 10: Total Receipts \$50 and under* (not listed above)		185	
Line 11: TOTAL RECEIPTS IN THE PERIOD		910	← 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

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/12/2019	Stacey Luster 120 Cataract St Worcester MA 1602	\$400.00	Human Resources Worcester State University
10/24/2019	CTE John Mahoney 138 Newton Avenue North Worcester MA 1609	\$100.00	State Representative Commonwealth of Massachusetts
09/25/2019	Susan Mailman 24 Holden Streer Worcester MA 01605	\$50.00	Owner Coghlin Electric
09/20/2019	Quincy Mingo 4444 Central Ave APT 418 Fremont CA 94536	\$25.00	Educator Stanford University
10/17/2019	Mary Motta 166 Whitmarsh Avenue Worcester MA 01606	\$25.00	Librarian QCC
10/15/2019	Tammy Murray 11 Kinnicutt Rd Worcester MA 01602	\$100.00	
10/15/2019	Tim Murray 11 Kinnicutt Rd Worcester MA 1602	\$100.00	CEO - Worc Chambers of Commerce
10/26/2019	Sean Parretti-Noone 405 Bridle Path Worcester MA 1604	\$100.00	
09/12/2019	Richard Schmitt 65 Tory Fort Lane Worcester MA 01602	\$50.00	
09/19/2019	Richard Schmitt 65 Tory Fort Lane Worcester MA 1602	\$100.00	
10/25/2019	Richard Schmitt 65 Tory Fort Lane Worcester MA 1602	\$50.00	
09/30/2019	Edman Zayzay 20279 Waters Row Ter Germantown MD 20874	\$100.00	Principal Software Engineer Eaton
Line 9: Total Receipts over \$50 (or listed above)		\$1,000.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$200.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1,200.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/21/2019	JOSEPH O'BRIEN	\$50.00	
10/15/2019	GAIL RANDALL	\$100.00	
10/22/2019	NEW ENGLAND REGIONAL COUNCIL OF CARPENTERS PC FUND	\$500.00	
10/17/2019	UBC & JA LOCAL 336	\$250.00	
Line 9: Total Receipts over \$50 (or listed above)		\$850.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$50.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$900.00	← 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
10/03/2019	CAMPAIGNS THAT WIN	210 PARK AVE WORCESTER, MA	LAWN SIGNS & HAND BILLS	1,387
09/09/2019	DUNKIN DONUTS	990 GRAFTON ST WORCESTER, MA	BAGEL, COFFEE	12.48
09/21/2019	PRICE CHOPPER	SUNDERLAND RD WORCESTER, MA	PIC SNACK MIX	12.97
09/20/2019	MCDONALD	595 MILL ST WORCESTER, MA	QUARTER POUNDERS; SMOOTHEES	24.26
09/09/2019	DUNKIN DONUTS	990 GRAFTON ST WORCESTER, MA	2 COOL MD STRAWBERRY	8.32
10/12/2019	ADDIE LEES SOUL FOOD	996 MAIN ST WORCESTER, MA	FRIED DINGS LARGE FOR EVENTI	53.13
10/03/2019	MCDONALD	595 MILL ST WORCESTER, MA	3 BUNDLE MCCHK	7.37
10/12/2019	PRICE RITE	WORCESTER	PAPER GOODS & SUPPLIES	18.56
09/13/2019	BURGER KING	1160 MAIN ST WORCESTER, MA	BACON DBL	15.15
09/14/2019	BURGER KING	1160 MAIN ST WORCESTER, MA	BACON DBL	20.15
09/19/2019	CHADWICK FOODMART	57 W BOYLSTON ST WORCESTER, MA	FOOD	25
10/06/2019	SPEEDWAY	180 MADISON ST WORCESTER, MA	FUEL	25
Line 12: Total Expenditures over \$50 (or listed above)				1,440.13
Line 13: Total Expenditures \$50 and under* (not listed above)				169.26
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,609.39

Enter on page 1, line 4 →

* 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/04/2019	SPEEDWAY	180 MADISON ST WORCESTER, MA	FUEL	25.24
10/13/2019	WALMART	25 TOBIAS BOLAND WAY WORCESTER		7.52
Line 12: Expenditures over \$50 (or listed above)				0
Line 13: Expenditures \$50 and under* (not listed above)				32.76
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				32.76

* 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
10/24/2019	CAMPAIGNS THAT WIN	210 PARK AVE WORCESTER, MA	MAILER & ONE THOUSAND HAND BILLS	2,933.75
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	2933



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Worcester City Clerk
2019 SEP -4 PM 1:11

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 05-09-19 Ending Date: 8-23-19

Type of Report: (Check one)

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

JARMOH KAMARA
Candidate Full Name (if applicable)

SCHOOL COMMITTEE - CITY OF WORCESTER
Office Sought and District

10 ROATH ST WORCESTER MA 01604
Residential Address

E-mail: electjarmohkamara@gmail.com

Phone # (optional): _____

COMMITTEE TO ELECT JARMOH KAMARA
Committee Name

DESMOND KAMARA
Name of Committee Treasurer

10 ROATH ST, WORCESTER, MA 01604
Committee Mailing Address

E-mail: desmond@all-nationsinsurance.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2819.00
Line 3: Subtotal (line 1 plus line 2)	2819.00
Line 4: Total expenditures this period (page 5, line 14)	2301.25
Line 5: Ending Balance (line 3 minus line 4)	517.765
Line 6: Total in-kind contributions this period (page 6)	830.00
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Berkshire Bank

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: 08/29/2019

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: _____ (Candidate's signature)

Date: 8/29/2019

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)
08/24/2019	Alaa Abusalah 25 Pine Ridge Dr Leicester	50	Occup: CPO Employer: N/A
06/13/2019	Daniel Acquah	4	Not Provided
06/13/2019	Aima Acquah	4	Not Provided
06/13/2019	Stella Selom Aggor 16 Pomona Worcester Ma 01602	150	Not Provided
06/15/2019	Collin Anderson 57 Mohawk st Staford	20	Occup: Teacher Employer: CES
	WINSTON 72 ESTHER ST. WORCESTER MA 01607	120	Occup: Material Coordinator Employer:
08/16/2019	Joseph Worcester MA 01604	50	Occup: Facilities Employer: WPI
05/24/2019	JAMES 15 RUBY ST #2 WORCESTER MA 01604	20	Occup: Therapist Employer: Self
06/08/2019	Jacqueline Boateng 12 McCusker Drive Apt. 12 Braintree	50	Occup: Paralegal Employer: Mintz
	Sam Borkay	50	Occup: Not Provided Employer: Not Provided
06/09/2019	MARILYN BUTLER 50 WILDROSE AVE WORCESTER MA 01602	20	Occup: Not Provided Employer: Not Provided
06/15/2019	COLLIN	20	Occup: Not Provided Employer: Not Provided
Line 9: Total Receipts over \$50 (or listed above)		270.00	
Line 10: Total Receipts \$50 and under* (not listed above)		288.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		558.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
06/13/2019	Lilian Chukwurah	2	Occup: Not Provided Employer: Not Provided
05/24/2019	Eric DeMeulenaere 23B Johnson Street Worcester MA 01604	50	Occup: Professor Employer: Clark University
06/25/2019	Erin and William Derr 21 Drexler St Worcester MA 01602	50	Occup: Teacher Optometrist Employer: Worcester Public School
06/22/2019	David Dyson 111 Augustus Ave Roselinedale MA 02131	10	Occup: Teacher Employer: Westwood
06/14/2019	MR.&MRS. FANNOH 987 WACHUSETT ST. WORCESTER MA	100	Occup: Not Provided Employer: Not Provided
05/25/2019	Patricia Feraud-King 145 University Drive #3628 Amherst	25	Occup: Asst Resident Director Employer: UMASS
05/24/2019	PAUL GAILAH 7 NOME ST WORCESTER MA 01605	50	Occup: Nurse Employer: Not Provided
06/13/2019	PAUL GAILAH 7 NOME ST WORCESTER MA 01605	10	Occup: Nurse Employer: Not Provided
06/13/2019	Gertura Gbarbo	11	Occup: Not Provided Employer: Not Provided
07/07/2019	Catherine Gichirgea	25	Occup: Not Provided Employer: Not Provided
08/18/2019	Harvey Gould 35 Saxon Rd Worcester MA 01602	35	Occup: Not Provided Employer: Not Provided
06/13/2019	Linda Graham	14	Occup: Not Provided Employer: Not Provided
05/25/2019	Heather-Lyn Haley 5 Woodland Rd Cherry Valley, MA	50	Occup: Professor Employer: UMASS
Line 9: Total Receipts over \$50 (or listed above)		100.00	
Line 10: Total Receipts \$50 and under* (not listed above)		332.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		432.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
08/12/2019	Deborah 20 Svea St Worcester MA 01607	50	Occup: Director Employer: YWCA of Central MA
06/13/2019	Dzifah Hiatji	20	Occup: Not Provided Employer: Not Provided
05/24/2019	MAGGIE Johnson WHITE ST WORCESTER MA 01605	30	Occup: Not Provided Employer: Not Provided
05/24/2019	SAYON JOHNSON 30 ALMONT AVE WORCESTER MA 01604	25	Occup: Not Provided Employer: Not Provided
07/07/2019	Hanah Kamans 673 Franklin st. Worcester MA 01608	25	Occup: Not Provided Employer: Not Provided
06/21/2019	Suliman 1 Armandale st Worcester MA 01603	80	Occup: Not Employed Employer: Not Employed
07/07/2019	Richard 65 James st., suite 207, Worcester MA 01603	100	Occup: Employer:
06/13/2019	David Kilgan	2	Occup: Not Provided Employer: Not Provided
06/13/2019	Geoffrey	20	Occup: Not Provided Employer: Not Provided
06/13/2019	Mat Kiyah	2	Occup: Not Provided Employer: Not Provided
06/13/2019	Zokleyah	14	Occup: Not Provided Employer: Not Provided
05/23/2019	BEDEE KOLLIE	50	Occup: Not Provided Employer: Not Provided
05/24/2019	EUGENE 9 SOUTH ST WORCESTER MA 01604	20	Occup: Not Provided Employer: Not Provided
Line 9: Total Receipts over \$50 (or listed above)		180.00	
Line 10: Total Receipts \$50 and under* (not listed above)		258.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		438.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
08/09/2019	Deborah 35 Eames St Providence RI 02960	25	Occup: Professor Employer: Providence College
06/13/2019	Stacey Luster	100	Occup: Not Provided Employer: Not Provided
07/07/2019	Mercy Maki 101B North Grafton Main St. Worcester MA 01536	25	Occup: Not Provided Employer: Not Provided
06/26/2019	Massa Mappy 155 Chandler St Worcester MA 01609	100	Occup: Not Employed Employer: Not Employed
06/19/2019	Joyce Mcnickles 204 Putnam Hill RD Sutton MA 01590	25	Occup: Educator Employer: Self
06/26/2019	garcon morweh 4601 S. Cottage Grove Ave 53553 Chicago	75	Occup: N/A Employer: N/A
07/27/2019	Nwayigne Okpa 3560 Willett Ave. Bronx NY 10467	100	Occup: Not Provided Employer: Not Provided
06/13/2019	Genesis O'Neil	10	Occup: Not Provided Employer: Not Provided
06/16/2019	RANDY OPONG 1110 RAMBLEWOOD BALTIMORE MD 21239	20	Occup: Student Employer:
05/24/2019	SEAN PARRETTI-NOONE 405 Bridle Path WORCESTER MA 01604	40	Occup: Not Provided Employer: Not Provided
06/13/2019	Andrew Piazza	20	Occup: Not Provided Employer: Not Provided
05/24/2019	LUNA RAIDY OLDE MILLBURY ST WORCESTER MA	40	Occup: Not Provided Employer: Not Provided
06/22/2019	HILDA RAMIREZ 81 BEACONSFIELD WORCESTER MA 01602	40	Occup: Not Provided Employer: Not Provided
Line 9: Total Receipts over \$50 (or listed above)		375.00	
Line 10: Total Receipts \$50 and under* (not listed above)		245.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		620.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
06/02/2019	ESTHER REGAILLARD 111 Country Club Blvd Apt 803 Worcester MA 01605	30	Occup: Owner Employer: BMR Staffing
07/31/2019	Katelyn Reinert 70 Strathmore Rd 9B Brighton	25	Occup: Human Resource Employer: Last Mile Health
06/23/2019	Teresa Rhodes 125 S Flagg St Worcester MA 01602	50	Occup: Not Employed Employer:
05/24/2019	DARIUS 58 HARLEY ST. WORCESTER MA 01606	60	Occup: Not Provided Employer: Not Provided
06/13/2019	Owura Sarkodieh	14	Occup: Not Provided Employer: Not Provided
07/07/2019	Agnes Sauolinder 337 Salisbury st. Worcester MA v01609	10	Occup: Not Provided Employer: Not Provided
05/23/2019	JAMES SULONTEH	60	Occup: Not Provided Employer: Not Provided
08/02/2019	Virgina 32 Hill Top Circle Worcester Ma 01609	25	Occup: Not Provided Employer: Not Provided
06/13/2019	Patrick Swift	2	Occup: Not Provided Employer: Not Provided
05/24/2019	LINDITA TAKA 20 DOROTHY AVE #2 WORCESTER MA 01606	50	Occup: Not Provided Employer: Not Provided
07/07/2019	Lucy Timu 17 Orme Street Worcester MA 01605	10	Occup: Not Provided Employer: Not Provided
	Violet Uwere 10 Salford st. Worcester Ma 01604	40	Occup: Not Provided Employer: Not Provided
06/19/2019	Vijay Varma 4208 Hermitage Drive Elliott City MD 21042	50	Occup: Researcher Employer: NIH
Line 9: Total Receipts over \$50 (or listed above)		120.00	
Line 10: Total Receipts \$50 and under* (not listed above)		306.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		426.00	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
05/25/2019	SABINE VASSAR 3 ROBERTSON RD WORCESTER MA	100	Occup: Not Provided Employer: Not Provided
06/13/2019	SABINE VASSAR 3 ROBERTSON RD WORCESTER MA	50	Occup: Not Provided Employer: Not Provided
06/26/2019	Musa Willie 635 E Chestnut Street Coatesville PA 19320	25	Occup: Social Worker Employer: Devereus foundation
06/14/2019	Kaska Yawo	50	Occup: Not Provided Employer: Not Provided
06/13/2019	Kwame Yeboah	20	Occup: Not Provided Employer: Not Provided
08/06/2019	Elena Yee 61 South Clover Street Apt. 3 Poughkeepsie NY 12601	100	Occup: Clinical Counselor Employer: Marist College
			Occup: Not Provided Employer: Not Provided
Line 9: Total Receipts over \$50 (or listed above)		200.00	
Line 10: Total Receipts \$50 and under* (not listed above)		145.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		345.00	← 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
08/12/2019	AI Prime Energy	1310 Grafton st., Worcester, MA 01604	Gas for Campaign	20
07/02/2019	AI Prime Energy	1310 Grafton st., Worcester, MA 01604	Gas for Campaign	15
06/28/2019	Campaigns that Win		18"X24" corrugated yard signs w/ stakes	212
06/28/2019	Campaigns that Win		Stakes for lawn signs	50
07/22/2019	Flynns Travel Plaza	307 Hartford TPK, Shrewsbury, Ma 01545	Gas for Campaign	20
08/20/2019	Guertin Graphics, Inc	136 Southbridge St., Worcester, Ma 01608	White Tee	\$156.25
05/20/2019	Guertin Graphics, Inc	137 Southbridge St., Worcester, Ma 01608	White Tee	200
05/20/2019	Guertin Graphics, Inc	138 Southbridge St., Worcester, Ma 01608	18"X24" corrugated yard signs w/ stakes	80
08/07/2019	Lowe's	533 Linclon St., Worcester, Ma 01605	Poland Spring	
08/07/2019	Lowe's	533 Linclon St., Worcester, Ma 01605	1-3-8 & 1-3-12 Spruce Pine Fir Furring Strip	5.38
08/25/2019	Lowe's	533 Linclon St., Worcester, Ma 01605	1-3-8 Spruce Pine Fir Furring Strip	4
07/22/2019	Lowe's	534 Linclon st., Worcester, Ma 01606	1-3-8 & Hillman 0.5-oz 0.75-in Copper Cut Tack	11.09
Line 12: Total Expenditures over \$50 (or listed above)				648.00
Line 13: Total Expenditures \$50 and under* (not listed above)				125.47
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				773.72

* 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
06/19/2019	QuickStop Printing	340 Shrewsbury St Worcester, MA 01604	Signs 14X22 one color two sided	395.00
06/11/2019	QuickStop Printing	340 Shrewsbury St Worcester, MA 01604	Palm Cards 4/4	525.94
08/24/2019	We are the Roses Event	Mechanics Hall, 321 Main st., Worcester, Ma 01608	Admission	21.95
08/10/2019	Worcester World Cup	Foley Stadium, 305 Chandler St, Worcester, MA 01602	Admission	20.00
05/24/2019	Goddaddy	Goddady	Domain Purchase	18
05/24/2019	Goddady	Goddady	Website	76.44
06/28/2019	Walmart	25 Tobias Boland way Worc MA 01607	food Color	11.43
06/28/2019	Dollar Tree	490 Lincoln St Worc MA 01605	Misc	5.31
07/18/2019	Pat's Towing	27 Shrewsbury St Worcester, MA	Towing fees while attending Campaign Event - Bancroft Sch Shrewsbury St Worc, MA	185.00
06/28/2019	AC Moore	Lincoln Plaza Worc MA 01605	Misc	34.74
06/28/2019	Campaign That Wins	210 Park Ave Worcester, MA 01609	Bumper Stickers	125.00
07/10/2019	Root and Press	623 Chandler St Worc MA 01602	Misc	6.5
08/20/2019	Guertin Graphics	136 Southbridge St Worc MA 01608	White Tee	78
Line 12: Expenditures over \$50 (or listed above)				1385.38
Line 13: Expenditures \$50 and under* (not listed above)				117.93
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1503.31

Enter on page 1, line 4 →

* 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
06/28/2019	Campaign That Wins	210 Park Ave Worcester, MA 01609	Taxes	24.22
Line 12: Expenditures over \$50 (or listed above)				0.00
Line 13: Expenditures \$50 and under* (not listed above)				24.22
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	24.22

* 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 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
08/14/2019	Worcester Carribean American Festival	P. O . Box 70301 Worcester, MA 01607	Participation in Parade	300
08/18/2019	Ann-Marie Lucci	63 Highland St Worcester, MA 01609	Food & Drinks - Campaign meet & greet	50
08/23/2019	Ann-Marie Lucci	63 Highland St Worcester, MA 01609	Food & Drinks - Campaign meet & greet	110
05/24/2019	Darius Sackor		Food & Drinks Campaign Kickoff	20
08/20/2019	Hilda Rimerez	81 Beaconsfield Worcester, MA	Food & Drinks Meet & Greet @ Hilda's home	150
08/18/2019	Lucy Candib & Richard Schmitt	65 Tory Fort Lane Worcester, MA 01602	Meet & Greet hosted by Lucy & Richard @ their home	150
08/18/2019	Frederick		Popcorn & Cotton Candy Meet & Greet Campaign Fundraiser	50

Line 15: In-Kind Contributions over \$50 (or listed above)	710.00
--	--------

Line 16: In-Kind Contributions \$50 & under (not listed above)	120.00
--	--------

Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS	830.00
---	---------------

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)



**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: Jermoh U. Kamara
 Residential Address: 10 South St. Worcester, MA 01604
 City / State / Zip: _____
 E-Mail Address: jermohforschungskomitee@gmail.com Phone #: 508-502-0907
 Party Affiliation: _____ (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: _____
 District: _____

COMMITTEE: Name of Committee: _____
 (The name of the committee must include the candidate's last name)
 Committee Mailing Address: _____
 City / State / Zip: _____ Phone #: _____

OFFICERS:

Chair: <u>PW Yankah</u> Residential Address: <u>7 Howe Street</u> City / State / Zip: <u>Worcester, MA 01605</u> Phone #: <u>508-963-5299</u>	Treasurer*: <u>DESMOND A. KAMARA</u> Residential Address: <u>9 Jerome St</u> City / State / Zip: <u>Southbridge MA 01550</u> Phone # <u>7742893262</u> Email <u>desmond@qil-nationinsurance-com</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse)</small>
Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____	Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ 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:

J Kamara
Candidate's signature

Date: 4-29-19

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:

Desmond A. Kamara
Treasurer's signature

Date: 4/29/19

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

SIGNED UNDER THE PENALTIES OF PERJURY:

PW Yankah
Chair's signature

Date: 5/8/19



Form CPF D103: Appointment of Depository Bank

Office of Campaign and Political Finance

Committee Name: Committee to Elect Jermoh Kamara

Office Sought/District: School Committee

Candidate Name: Jermoh Kamara

Candidate E-Mail: jermohforschoolcommittee@gmail.com

Treasurer Name: DESMOND A. KAMARA

Treasurer E-Mail: desmond@all-nationsinsurance.com

2019 MAY -9 PM 3:17
Worcester City Clerk

ACTIVITY PRIOR TO ESTABLISHING DEPOSITORY BANK ACCOUNT

By checking this box, I certify that prior to establishing this bank account, no money (including the candidate's own) was raised or spent for any political purpose. (If money was raised or spent prior to opening this bank account, please contact OCPF for information about how to disclose the activity)

I certify that the bank named below has been designated as the depository for campaign funds and I authorize said bank to submit to the Director of the Office of Campaign and Political Finance the reports required by M.G.L. Chapter 55. I agree that all financial activity following the date the bank account is opened shall be conducted through the depository account.

SIGNED UNDER THE PENALTIES OF PERJURY:

J. Kamara
Signature of Candidate Date: 5/9/19

[Signature]
Signature of Treasurer Date: 5/9/19

(Below to be completed by bank)

BANK ACKNOWLEDGMENT

The undersigned bank is authorized to transact business and has its main office, or a branch office, in Massachusetts. The bank hereby acknowledges that it has been designated as the depository for campaign funds of the above named candidate or committee and agrees to file campaign finance reports with OCPF as required by c. 55 until such time as OCPF notifies the bank that its reporting requirements are no longer required.

Bank Name: Berkshire Bank

Date Account Opened: 05-09-2019

Phone #: 508-797-6954

E-mail: Ble@Berkshirebank.com

Bank Mailing Address: 993 Grafton St

City / State / Zip: Worcester MA 01604

Authorized by: Brandon Le

Title: Assistant Branch Manager

[Signature]
Authorized Employee's Signature Date: 05-09-2019