Commonwealth of Massachusetts

Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: Worcester

Reporting Period: Beginning: Aug 23, 2019 (MM/DD/YYYY) Ending: Dec 31, 2019 (MM/DD/YYYY)

Type of Report: (Check One)

- ☐ 8th day preceding preliminary/primary
- ☐ 8th day preceding election
- ☐ 30th day following election (town or special)
- ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
12-26-19	Hermorne T. McConner	Hermorne T. McConner	17 Home St Apt #2	School Committee

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Commonwealth of Massachusetts

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Received
Worcester City Clerk
2019 AUG 30 PM 11: 19

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 7-9-19 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

Hermorne Theresa McConner
Candidate Full Name (if applicable)
Worcester School Committee
Office Sought and District
17 Home St Apt #2
Residential Address
E-mail: Queen8053@msn.com
Phone # (optional): (508) 304-8900

Worcester School Committee
Committee Name
Sheila King Goodwin
Name of Committee Treasurer
17 Home St
Committee Mailing Address
E-mail: Queen8053@msn.com
Phone # (optional): (413) 265-8502

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	713.45
Line 3: Subtotal (line 1 plus line 2)	713.45
Line 4: Total expenditures this period (page 5, line 14)	310.49
Line 5: Ending Balance (line 3 minus line 4)	402.96
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:	TD 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: Sheila King Goodwin (Treasurer's signature) Date: 8-29-19

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: Hermorne T. McConner (Candidate's signature) Date: 8-30-19

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)
7-14-19	Bake Sale	229.45	
7-9-19	Tea Rally	484.00	

Line 9: Total Receipts over $50 (or listed above)	713.45
Line 10: Total Receipts $50 and under* (not listed above)	
Line 11: TOTAL RECEIPTS IN THE PERIOD	713.45 ← 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)

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 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
8-23-19	Vista Print	275 Wyman St Waltham MA 02451	Posters + Yard Sign	216.49

Line 12: Total Expenditures over $50 (or listed above)	216.49
Line 13: Total Expenditures $50 and under* (not listed above)	
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	216.49

* 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
7-29-19	Spiritually Fabulous Ministries	PO Box 2279 Worcester, MA 01613	Vendor Table	$50.00
7-26-19	Vistaprint	275 Wyman St Waltham, MA 02451	Campaign flyers	43.34

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**	93.34

* 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 M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

2019 JUL -9 PM 1:01 Worcester City Clerk

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: Hermorne T McConner

Residential Address: 17 Home St Apt 2

City / State / Zip: Worcester MA 01609

E-Mail Address: Queen8053@msn.com Phone #: 508-304-8900

Party Affiliation: (If applicable)

OFFICE SOUGHT/PURPOSE:

Title: School Committee

District: Worcester

COMMITTEE:

Name of Committee: Commitee to Elect McConner for School Committee

(The name of the committee must include the candidate's last name)

Committee Mailing Address: 17 Home St Apt 2

City / State / Zip: Worcester MA 01609 Phone #: 508-304-8900

OFFICERS:

Chairman: Hermorne T McConner	**Treasurer*:** Johnnie Young
Residential Address: 17 Home St Apt 2	Residential Address: 7-E Goldthwaite Apt 4
City / State / Zip: Worcester MA 01609	City / State / Zip: Worcester MA 01605
Phone #: 508-304-8900	Phone #: 508-755-3995 Email:
	*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: Hermorne T McConner Date: 6-9-19

Candidate's signature

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: Johnnie Young Date: 6-9-19

Treasurer's signature

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

SIGNED UNDER THE PENALTIES OF PERJURY: Hermorne T McConner Date: 6-9-19

Chairman's signature