Commonwealth of Massachusetts

CPF ID #: _____ (For Office Use Only)

Form CPF 101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE

Office of Campaign and Political Finance

RECEIVED
MAR 20 2014
TOWN CLERK
SOMERSET, MA

File with: Director
Office of Campaign and Political Finance
One Ashburton Place, Room 411 Boston, MA 02108

(617) 979-8300
ocpf@cpf.state.ma.us
http://www.mass.gov/ocpf

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: Steve Moniz
Residential Address: 84 New Hampshire Ave
City / State / Zip: Somerset MA 02726
Phone #: 508 617 9743 E-Mail: Steve2470@comcast.net
Party Affiliation: (If applicable)

OFFICE SOUGHT/PURPOSE:

Title: Selectman
District: Town of Somerset

COMMITTEE:

Name of Committee: Committee to Elect Steve Moniz
(The name of the committee must include the candidate's last name)
Committee Mailing Address: 45 Carrie Hood Lane
City / State / Zip: Somerset MA 02726 Phone #: 5084965119

OFFICERS:

Chairman: Steve Silverman
Residential Address: 30 Country Drive
City / State / Zip: Somerset MA 02726
Phone #: 5086793300

Treasurer: Genoveva Andrade
Residential Address: 45 Carrie Hood Lane
City / State / Zip: Somerset MA 02726
Phone #: 5084965119

Other Officer/Title:
Residential Address:
City / State / Zip:
Phone #:

Other Officer/Title:
Residential Address:
City / State / Zip:
Phone #:

(Attach an additional page, 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: _____ Date: 3/10/14
Candidate's signature

I hereby accept the office of Treasurer of the above-named committee. I understand that 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.
SIGNED UNDER THE PENALTIES OF PERJURY: Genoveva Andrade Date: 3/10/14
Treasurer's signature

I hereby accept the office of Chairman of the above-named committee.
SIGNED UNDER THE PENALTIES OF PERJURY: Stephen D. Silverman Date: 3/10/14
Chairman's signature

Commonwealth of Massachusetts

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

RECEIVED
MAY 02 2014
By

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 2 Ending Date: May 2, 2014

Type of Report: (Check one)

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

Steve Moniz
Candidate Full Name (if applicable)

Selectman
Office Sought and District

84 New Hampshire Ave Somerset MA 02726
Residential Address

Telephone Number (optional):

The Committee to elect Steve Moniz
Committee Name

Genoveva Andrade
Name of Committee Treasurer

45 Carrie Hood Lane Somerset MA 02726
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11)	2045.00
Line 3: Subtotal (line 1 plus line 2)	2045.00
Line 4: Total expenditures this period (page 5, line 14)	1882.44
Line 5: Ending Balance (line 3 minus line 4)	162.56
Line 6: Total in-kind contributions this period (page 6)	420.00
Line 7: Total (all) outstanding liabilities (page 7)	-0-
Line 8: Name of bank(s) used:	Somerset Federal Credit Union

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: Genoveva Andrade (Treasurer's signature) Date: May 2, 14

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: _____ (Candidate's signature) Date: 5-2-14

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)
3-2-14	Fundraiser Roger's Family Resturant	1815.00	
4-24-14	Fundraiser Progressive Club may 3, 14	230.00	
Line 9: Total Receipts over $50 (or listed above)		2045.00	
Line 10: Total Receipts $50 and under* (not listed above)		-0-	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2045.00	← 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)

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
3-2-14	Roger's Family Resturant	1229 Wilbur Ave Somerset MA	Fundraiser	470.00
3-19-14	EXPRESS PRINTING	192 ANAWAN ST Fall River MA	POLITICAL SIGNS	881.88
3-27-14	Somerset PROGRESSIVE CLUB	Seaver ST Somerset MA	Fundraiser Deposit for Hall	50.00
3-28-14	L&P Graphics	376 Peckham St Fall River MA	PRINT TICKETS for 5/3/14 fundraiser	41.81
4-17-14	L&P Graphics	376 Peckham St Fall River MA	Flyers	63.75
4-24-14	SouthCoast Media	25 ELM STREET New Bedford MA	Ad for SPECTATOR	375.00

Line 12: Total Expenditures over $50 (or listed above)	1882.44
Line 13: Total Expenditures $50 and under* (not listed above)	-0-
Line 14: TOTAL EXPENDITURES IN THE PERIOD	1882.44

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

	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
4-2-14	Genoveva Andrade	45 Carrie Hood Lane Somerset MA 02726	2 Large 4X8 SIGNS	180.00
4-13-14	Steve Moniz	84 New Hampshire Ave Somerset MA 02726	2 Large 4X8 SIGNS	180.00

Line 15: In-Kind Contributions over $50 (or listed above)	360.00
Line 16: In-Kind Contributions $50 & under (not listed above)	60.00
Enter on page 1, line 6 → **Line 17: TOTAL IN-KIND CONTRIBUTIONS**	420.00

* 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 M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

Commonwealth of Massachusetts

RECEIVED
JUN 12 2014
By RB

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: May 3 Ending Date: June 12 2014

Type of Report: (Check one)

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

Steven Moniz
Candidate Full Name (if applicable)

Selectman
Office Sought and District

84 New Hampshire Ave
Residential Address

Telephone Number (optional):

Committee to Elect Steve Moniz
Committee Name

Genoveva Andrade
Name of Committee Treasurer

45 Carrie Hood Lane
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1:	Ending Balance from previous report	162.56
Line 2:	Total receipts this period (page 3, line 11)	1480.00
Line 3:	Subtotal (line 1 plus line 2)	1642.56
Line 4:	Total expenditures this period (page 5, line 14)	610.00
Line 5:	Ending Balance (line 3 minus line 4)	1032.56
Line 6:	Total in-kind contributions this period (page 6)	-0-
Line 7:	Total (all) outstanding liabilities (page 7)	1111.56
Line 8:	Name of bank(s) used:	Somerset Federal Credit Union

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: Genoveva Andrade (Treasurer's signature) Date: 6/12/14

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.

☐ **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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: (Candidate's signature) Date: 6/12/14

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)
5/3/14	Richard Pierce 15 Saddlebrook Ter Somerset	200.00	
5/3/14	Tom Pasternak 202 Rock St Fall River MA	300.00	owner of Walsh Pharmacy Fall River MA
5/5/14	Ticket Sales for fund raiser	930.00	
5/8/14	refund from Deposit For Progressive Club	50.00	

Line 9: Total Receipts over $50 (or listed above)	1480.00	
Line 10: Total Receipts $50 and under* (not listed above)	-0-	
Line 11: TOTAL RECEIPTS IN THE PERIOD	1480.00	←▯ 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 a and records of all expenditures, but need only itemize those over $50. Expenditures $50 and under may be added together, from committee records, a 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
5/3	Michael Desmarias	Beaver Street Somerset MA	made food for fundraiser 5/3/14	300.00
5/12	Comfort Zone Riverside Ave	Riverside Ave Somerset MA	Elect day Party	310.00
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Line 12: Total Expenditures over $50 (or listed above)	610.00
Line 13: Total Expenditures $50 and under* (not listed above)	-0-
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	610.00

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

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

* 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.

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	

Enter on page 1, line 6 →

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
	Express Printing	Anawan St Fall River MA	Signs Bumper Stickers	$1111.56

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	

Enter on page 1, line 7 →

Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

RECEIVED
JAN 20 2015
TOWN CLERK
SOMERSET MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: JUNE 12, 2014 Ending Date: DEC 31, 2014

Type of Report: (Check one)

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

STEVEN MONIZ
Candidate Full Name (if applicable)

SELECTMAN
Office Sought and District

84 NEW HAMPSHIRE AVE
Residential Address

Telephone Number (optional):

COMMITTEE TO ELECT STEVE MONIZ
Committee Name

GENOVEVA ANDRADE
Name of Committee Treasurer

45 CARRIE HOOD LANE
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1:	Ending Balance from previous report	1032.56
Line 2:	Total receipts this period (page 3, line 11)	—
Line 3:	Subtotal (line 1 plus line 2)	—
Line 4:	Total expenditures this period (page 5, line 14)	—
Line 5:	Ending Balance (line 3 minus line 4)	—
Line 6:	Total in-kind contributions this period (page 6)	
Line 7:	Total (all) outstanding liabilities (page 7)	1111.56
Line 8:	Name of bank(s) used:	SOMERSET FEDERAL CREDIT UNION

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: Genoveva Andrade (Treasurer's signature) Date: 1-20-15

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: _____ (Candidate's signature) Date: 1-20-15

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 (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 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
	EXPRESS PRINTING	ANAWAN ST FALL RIVER, MA	SIGNS BUMPER STICKERS	$1111.56

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