



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

**Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

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:

|                               |   |
|-------------------------------|---|
| <b>CANDIDATE:</b>             | Full Name: <u>Christopher Godet</u>                     |
|                               | Residential Address: <u>70 Daws Terrace</u>             |
|                               | City / State / Zip: <u>Somerset, MA 02726</u>           |
|                               | E-Mail Address: <u>CHR1523 @ msn.com</u> Phone #: _____ |
|                               | Party Affiliation: _____ (If applicable)                |
| <b>OFFICE SOUGHT/PURPOSE:</b> |   |
|                               | Title: <u>Somerst K-8 School Committee</u>              |
|                               | District: _____   |

|                   |   |
|-------------------|---|
| <b>COMMITTEE:</b> | Name of Committee: <u>Committee to elect Christopher Godet</u>                    |
|                   | <small>(The name of the committee must include the candidate's last name)</small> |
|                   | Committee Mailing Address: <u>64 Jette St</u>                                     |
|                   | City / State / Zip: <u>Swansea MA 02777</u> Phone #: _____                        |

**OFFICERS:**

|  |   |
|--|---|
| <b>Chairman:</b> <u>Ellen Alexandre</u><br>Residential Address: <u>64 Jette St.</u><br>City / State / Zip: <u>Swansea MA 02777</u><br>Phone #: _____ | <b>Treasurer*:</b> <u>Ellen Alexandre</u><br>Residential Address: <u>64 Jette St.</u><br>City / State / Zip: <u>Swansea MA 02777</u><br>Phone #: _____ Email: _____ |
| <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>   |   |
| Other Officer/Title: _____<br>Residential Address: _____<br>City / State / Zip: _____<br>Phone #: _____  | Other Officer/Title: _____<br>Residential Address: _____<br>City / State / Zip: _____<br>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:

Christopher Godet Date: 3/29/19  
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:

E Alexandre Date: 3/29/19  
Treasurer's signature

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

SIGNED UNDER THE PENALTIES OF PERJURY:

E Alexandre Date: 3/29/19  
Chairman's signature