



## Form CPF 101: STATEMENT OF ORGANIZATION **CANDIDATE'S COMMITTEE**

Office of Campaign and Political Finance

File with: Director Office of Campaign and Political Finance One Ashburton Place, Room 411, Boston, MA 02108 ZOID JAN 12 P 5: 27 (617) 979-8300 / (800) 462-OCPF ocpf@cpf.state.ma.us www.mass.gov/ocpf

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as an ended, of the organization of a candidate's committee as follows:

John M. Hickey

CANDIDATE:	Full Name:	John	M. Hick	ey			
	Residential Address:	82	Sexton	Ave.			
	City / State / Zip:	West	wood			MA DE	2090
	Email Address:	hickey.	im@yah	OG. COM	1	Phone #: 781 - L	086-9880
	Party Affiliation:	Demo	erati				(If applicable)
OFFICE COLICI	HT/DHDDACE.						
OFFICE SOUG		Salar	10000				
	Title:	selec	TIVYUI				
	District:	West	WOOOL				
COMMITTEE:	Name of Committee		mmittee The name of the comm	Λ.	t John	Hicker (ame)	<i>f</i>
	Committee Mailing	rudiess.	Jexton	Ave.	00000		200 1070
OFFICERS:	City / State / Zip:	Wes	stwood	MA	00090	Phone #: 617	-320-1818
Chairman:	Frank Ke	111		Treasurer*:	Cather	ine Cu	Cleu
Residential Address:				Residential Addr	ess Bonn	eu St.	5
City / State / Zip:	Distropod		1A 02090	City / State / Zip:	Westu	ood	MA 02090
Email:		Phone #	i	Email:	ufamily	10 venzon. PK	the #: 617-347-293
			74.	* A public emplo	yee may not serve a	s treasurer of any polit	ical committee (see reverse).
(Attach an additional page, if necessary, with other officers and finance committee, if any.)							
	at candidates are re-	quired to keep de		records of all cam			one committee on his/her six years from the date of  Date: 4916
that: 1) I am subject t	o certain duties and npaign finance activ bloyee, I must resign on his/her behalf.	liabilities under ity for a period of this position and	M.G.L. c. 55, included six years from the	ing the timely fili date of the releva	ng of campaign fi nt election; 2) if a	nance reports and ke	c. 55, s. 13. I understand eeping detailed accounts of this office I become an urer of the political
I hereby accept the of SIGNED UNDER TH	ffice of Chairman of	f the above-name	Treasurer's signatu	ire Au	ng []	,	1 1
			Chairman's signati	Lire St	M		Date: 1/9/16