CPF ID #:



Form CPF 101 P: Change of Purpose Candidate's Political Committee Office of Campaign and Political Finance

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

(617) 979-8300 (800) 462-OCPF ocpf@cpf.state.ma.us http://www.mass.gov/ocpf

1.	Name of Candidate:	Alexandra Turn	er		
2.	Office previously held/sought:	12th District St	ate Rep		
3.	Office now sought:	Lancaster Selec	ct Board		
4.	Party (if applicable):	Democrat for S	tate Rep Office; N/A for local office		
5.	Committee:	Committee to E	Elect Alexandra Turner		
		Mailing Address:	1473 Main St		
		City / State / Zip:	Lancaster MA 01523		
5.	Contact Person:	Sue Thompson			
		Mailing Address:	1473 Main St	-	
		City / State / Zip:	Lancaster MA 01523		
		Email: sue.thor	mpson@comcast.net	Phone #:	9783657682

In accordance with the requirements of M.G.L. c. 55, I hereby certify that the above-named political committee is now organized for the purpose stated above.

SIGNED UNDER THE PENALTIES OF PERJURY:

Date: 4/28/2021

Date: 4/29/2021



Form CPF T101: CHANGE OF TREASURER: ACCEPTANCE OF OFFICE BY TREASURER

Office of Campaign and Political Finance

CPF ID #:

Office of Campaign and Political Finance One Ashburton Place, Room 411 Boston, MA 02108 1. Committee Name: Committee to Elect Alexandra Turner 2. New Treasurer*: Susan Thompson *A public employee may not serve as treasurer of any political committee (see below). 2a. Treasurer's Address: 1473 Main St City/State/Zip: Lancaster MA 01523 Phone #: Email Address: sue.thompson@comcast.net 3. Committee Mailing Address: 1473 Main St City/State/Zip: Lancaster MA 01523 Phone #: City/State/Zip: Lancaster MA 01523 Phone #:		(617) 979-8300 ocpf@cpf.state.ma.us www.OCPF.us						
1.	Committee Name:	Commi	ttee to Elect Ale	xandra Turner				
2.	New Treasurer*:	Susan -	Thompson					
One Ashburton Place, Room Boston, MA 02108 1. Committee Name: 2. New Treasurer*: 2a. Treasurer's Address: City/State/Zip: Email Address: 3. Committee Mailing Address:			t serve as treasurer of any po	litical committee (see below)				
	City/State/Zip:	Lancast	er		MA	01523	Phone #:	9783657682
	Email Address:	sue.th	ompson@como	cast.net				
3.	Committee Mailing A	Address:	1473 Main St					
			City/State/Zip:	Lancaster	MA	01523	Phone #:	9783657682
that:	1) I am subject to cert	ain dutie	s and liabilities un	amed committee. I affirm the	the timely filing of campa	ign finance rep	orts and keeping	g detailed accounts

ecords 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 and notify OCPF of my resignations; and 3) a candidate or elected official may not serve as the treasurer of a political action committee except as authorized by MG.L. c. 55, s. 5A nor for the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Sersan Thorns on	Date:	May 52021
Treasurer's signature		7.013

FOR CANDIDATE COMMITTEES ONLY

I hereby consent to the appointment of the new treasurer of this committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature

DEFINITION OF A PUBLIC EMPLOYEE

M.G.L. Chapter 55, Section 13 states that a person who is employed for compensation by the Commonwealth or any county, city or town (other than an elected official) may not directly or indirectly solicit or receive political contributions. Such persons may not serve as treasurers of any political committee. If you are unsure of your status, please contact OCPF for further guidance.

SELECTED EXTRACTS FROM M.G.L C. 55

Section 3 requires the director to:

"assess a civil penalty for any [late filed] report ... of twenty-five dollars (\$25) per day [up to \$5,000 per report]. In the case of failure to file by a candidate or a candidate's committee, the civil penalty shall be assessed against the candidate; and in all other instances, the civil penalty shall be assessed against the treasurer of a political committee

<u>Section 5</u> outlines statements of organization of political committees:

... Any change in information previously submitted in a statement of organization shall be reported to the director, or if organized for the purpose of a city or town election only, to the city or town clerk, within ten days following the change.

Each political committee shall have a treasurer who shall qualify for his office by filing a written acceptance thereof with the director, or if organized for the purpose of a city or town election only, with the city or town clerk. Said treasurer shall remain subject to all the duties and liabilities imposed by this chapter until his written resignation of the office is received or his successor's written acceptance is filed as aforesaid. No person acting under the authority of, or on behalf of, any political committee shall receive any money or anything of value, or expend or disburse the same, or incur expenses while it has no treasurer qualified as aforesaid, or while the name and address of any of its officers or members, as originally or subsequently chosen, is not filed in accordance with the provisions of this section or chapter 52, as the case may be.

Each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts as prescribed for a candidate by the provisions of section two. Each treasurer of a political committee shall keep said records for a period of six years following the date of the relevant election No expenditure shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents



Form CPF M 102: Campaign Finance Report

Municipal Form

LANCASTER TOWN CLERK RCUD 2021 JUN 16 AMS:04

Office of Campaign and Political Finance

Fill in Re	eporting Period dates: Beginning Date:	5/05/2	Ending Date: Ob / 11 / 20-2/	
	Report: (Check one)			
Sth day	y preceding preliminary 8th day preceding election	<u>X</u> 30 da	y after election year-end report dissolution	
A	Candidate Full Name (if applicable)	Co	Committee Name	
	SELECT BOARD		D SUSAN THEMPSON	
111	Office Sought and District		Name of Committee Treasurer	
0 لاط	MAIN ST LANCASTER MA 01521 Residential Address	-	Committee Mailing Address	
E-mail:	ALIXTURNER @ GMAIL. COM	E-mail:	Sue thompson @ comcast, net	
Phone # (opti			(optional): 918 365 7682	
t mone ii (opu	149 340 0726	= I none # ((Optional). 974 363 7682	
Period and an artist and artist artist and artist and artist and artist artist and artist artist and artist artist and artist artist artist and artist art	SUMMARY BALANC	CE INFO	PRMATION:	
in the state of th	Line 1: Ending Balance from previous report	499.33		
	Line 2: Total receipts this period (page 3, line 11	1700.00 2199.33 715.00		
10.000	Line 3: Subtotal (line 1 plus line 2)			
	Line 4: Total expenditures this period (page 5, lin			
1	Line 5: Ending Balance (line 3 minus line 4)		1484.93	
	Line 6: Total in-kind contributions this period (pa	age 6)	1981.86	
	Line 7: Total (all) outstanding liabilities (page 7)		140.06	
	Line 8: Name of bank(s) used: WORKERS CR	15011 NN	ION EANORTER MY	
certify that I letivity, include nance activity	Committee Treasurer: have examined this report including attached schedules and it is, to the besiding all contributions, loans, receipts, expenditures, disbursements, in-kind y of all persons acting under the authority or on behalf of this committee in the penalties of perjury:	contributions	and liabilities for this reporting period and represents the campaign	
OR CAN	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox only)		
I certify the activity, o	te with Committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in act any liabilities nor made any expenditures on my behalf during this reporting	cordance with	the requirements of M.G.L. c. 55. I have not received any contributions,	
I certify the	te without Committee hat I have examined this report including attached schedules and it is, to the ctivity, including contributions, loans, receipts, expenditures, disbursements finance activity of all persons acting under the authority or on behalf of thi	s, in-kind contr	ributions and liabilities for this reporting period and represents the	
	the penalties of perjury: Aug Manual		(Candidate's signature) Date: 06/B/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)	Occupation & Employer (for contributions of \$200 or more)	
05/10/2021	Dere Bentlett 10 Box 92 768 WEST ST D SLANCASTER MY 01942	50. "	
05/06/2021	Sue Billing; 120 WHITCOMB DR LAN CASTER M 01527	50. **	
05/04/2021	DAVID CRAMER 119 FIRE RD 11 LANCASTOR M 01523	100.**	
05/08/2021	GEORGE : KAREN DAVES 77 BOLTON RD LANCASTER MA 01523	50.00	
05/17/2021	DED & JOU P'ERAMO 127 HARVARD RD LANCASTER MY 01523	100. 26	
03 54 2021	ROBERT LIPSTONE 311 NEERD LANDSTER MA 01723	500.00	RETINED
05/14/2021	JEAN LIPSTONE JII NECK RD LANUASTER MA 01727	500.00	RETINED
04/27/2021	CLIFF MCMULLEN 742 MAIN ST LANCASTER MA 01529	50,00	
05/20/2021	VICTORIA PETRACCA 67 WOODLAND MEADON DR LANCASTER MA 01523	50."	
5/10/2021	MARY RICHARDS 189 PRESCOTT ST CLINTON MA 01510	₹0.°°°	
05 12 204	CARA SANFORD 350 BULL HILL RD LANGSTON MA 01523	50	
04/27/2021	SUSAN SMILEY 183 PACKARD ST LANCESTER MAGISZS	50	
ine 9: Total Receipt	s over \$50 (or listed above)	1600.00	
ine 10: Total Receip	ts \$50 and under* (not listed above)		2
	CEIPTS IN THE PERIOD	1760.00	Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
05/02/2021	SUSAN THOMPSUN 1473 MAIN ST LANDASTER MA 01523	100.10	
-			
ne 9: Total Receipts	over \$50 (or listed above)	100,00	
ne 10: Total Receipts	s \$50 and under* (not listed above)		
ne 11: TOTAL REC	CEIPTS IN THE PERIOD	1700,80 E	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
06/08/1621	WINNING PAMPAIN STRATEGIES	BP9 RIVER ROAD HUDSON MA 01748	LAWN SIGNS	652.50
0 8 0 8 2024	WINNING LAMPAIGN STRATEGIES	399 RIVER ROAD HURSON MA DITYP	H STAKES FOR	62.50
				percent de constitue de la con
Line 12: Total Expenditures over \$50 (or listed above)			715.00	
Line 13: Total Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	715.00

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

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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
05/01/2021	JON ROPER	S TURNER LANG LANGASTER MA 01528	POST CARD MAILING TO ALL LON CASTON AFSIDENTS	\$1000.00
05/06/2021	IRENE ROBER	T TURNER LANG LANCASTER M 01523	POSS CARD MALLING TO ALL LAUCASTER RES DENTS	186.90
05/06/2021	IRENE ROPER	S TURNIFA LANE LANCASTER MA 01513	POSTAGE FOR POST CARR MAILOUT	906.35
05/06/2021	IRGNE ROPER	T TURNER LANE LANCAS FER M401523	TAX ON POSTEARD MAILER	69.15
A Section of the Sect		Line 15: In-Kind Contributions	over \$50 (or listed above)	Mranel
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.

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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
BEKORE 05/07/2021	ALUXANDAA TUNNGA	620 MAIN ST LAN CASTER MA 01523	CARRY-OVER LIBBILITY IFROM PREVIOUS CAMPAION	\$ 140.02
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	\$140,06