



The Commonwealth of Massachusetts

ELECTED CITY, WARD AND TOWN POLITICAL COMMITTEE REPORT

CRF ID # Spru
(For Office Use Only)

MAY 5

Election Page 1 of 3

NAME OF CITY/TOWN: Springfield WARD (if applicable): 7
 PARTY: Democratic DATE OF REPORT: 4/24/2020

INDICATE THE PURPOSE OF THIS REPORT BY CHECKING THE APPROPRIATE BOX BELOW:

STATEMENT OF ORGANIZATION CHANGE OF OFFICER(S) MEMBERSHIP UPDATE

Submit this report to the four offices listed below. File the original with the Office of Campaign and Political Finance, and file copies of this report with the other three offices listed.

- Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 979-8300 / (800) 462-OCPF (toll free in MA)
ocpf@cpf.state.ma.us / http://www.mass.gov/ocpf
- Secretary of the Commonwealth, William Francis Galvin
Elections Division
One Ashburton Place, Room 1705
Boston, MA 02108
(617) 727-2828 / (800) 462-VOTE (toll free in MA)
elections@sec.state.ma.us / http://www.sec.state.ma.us/ele/eleidx.htm
- State Party Committee Headquarters
- City / Town Clerk or Election Commission

City Ward Committee secretaries must also file a list of officers and members with the chairman of the city committee of the political party which it represents (Ch. 52, Sec. 5).

PLEASE LIST BELOW THE NAME, RESIDENTIAL ADDRESS AND ZIP CODE OF THE OFFICERS OF THIS COMMITTEE:

Chairperson: <u>Virginia Lyons</u> Residential Address: <u>1296 Summer Ave</u> City / State / Zip: <u>Springfield MA 01118</u> Email: <u>ginlyons@yahoo.com</u> Phone #: <u>413-726-8616</u>	Secretary: <u>Aimee Loisel</u> Residential Address: <u>121 Benz St.</u> City / State / Zip: <u>Springfield MA 01118</u> Email: <u>aimee.loiselle@ymail.com</u> Phone #: _____
Treasurer*: <u>Lisa Decker</u> Residential Address: <u>128 Hartford Ter</u> City / State / Zip: <u>Springfield MA 01118</u> Email: <u>lisadecker@kw.com</u> Phone #: <u>413-636-1073</u>	<p><i>*A public employee may not serve as treasurer of any political committee.</i></p> <p><i>M.G.L. c. 55, s. 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.</i></p>

I hereby submit this list of officers and members (including associate members) of the above-mentioned committee to the Secretary of the Commonwealth in accordance with Ch. 52, Sec. 5 of the Massachusetts General Laws.

Aimee Loisel
Secretary's signature Date: 4/24/2020

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; and 2) if after my acceptance of this office I become an appointed public employee, I must resign and notify OCPF of my resignation.

SIGNED UNDER THE PENALTIES OF PERJURY:
Lisa Decker
Treasurer's signature Date: 4/24/2020

LIST OTHER OFFICER'S & MEMBER'S NAMES, TITLES, RESIDENTIAL ADDRESSES AND ZIP CODES ON THE REVERSE

LIST OTHER OFFICER'S NAMES, TITLES, RESIDENTIAL ADDRESSES AND ZIP CODES BELOW:

Other Officer/Title: <u>George Sampson Vice Chair</u>	Other Officer/Title: <u>City of Springfield, MA</u>
Residential Address: <u>78 Dayton St.</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>MAY 5 2020</u>
Other Officer/Title: <u>Tony Taylor - Affirmative Action</u>	Other Officer/Title: <u>Election Commission</u>
Residential Address: <u>1341 Plumtree Rd</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: _____

MEMBERS:

Member: <u>Bruce Samuel Adams</u>	Member: <u>Timothy Allen</u>
Residential Address: <u>48 Briarwood Ave</u>	Residential Address: <u>141 Newton Rd</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>
Member: <u>Helen Cawton</u>	Member: <u>Bettie Hallen</u>
Residential Address: <u>47 Overlook Dr.</u>	Residential Address: <u>216 Mount Holly Dr</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>
Member: <u>William Foley, Jr</u>	Member: <u>Sally Markey</u>
Residential Address: <u>221 Wildwood Ave</u>	Residential Address: <u>37 Overlook Dr</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>
Member: <u>Lisa Decker</u>	Member: <u>Angelo Pappola, Jr</u>
Residential Address: <u>128 Hartford Ter</u>	Residential Address: <u>44 South Shore Dr</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>
Member: <u>Aimee Loiselle</u>	Member: <u>Elizabeth R Hogan</u>
Residential Address: <u>121 Benz St.</u>	Residential Address: <u>29 Ridgcrest St.</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>
Member: <u>GARRET S. Sullivan</u>	Member: <u>Carolyn Almeida</u>
Residential Address: <u>91 Roxboro Rd</u>	Residential Address: <u>53 Ames St.</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>
Member: <u>MARTHA MARIE HANNON</u>	Member: <u>VIRGINIA LYONS</u>
Residential Address: <u>72 Harmon Ave</u>	Residential Address: <u>1296 Sumner Ave</u>
City / State / Zip: <u>Springfield MA 01119</u>	City / State / Zip: <u>Springfield MA 01119</u>

ASSOCIATE MEMBERS:

Associate Member: _____	Associate Member: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Associate Member: _____	Associate Member: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Associate Member: _____	Associate Member: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____

(Attach an additional page, if necessary, with other officers, members and associate members.)

LIST OTHER OFFICER'S NAMES, TITLES, RESIDENTIAL ADDRESSES AND ZIP CODES BELOW:

Other Officer/Title: _____	Other Officer/Title: _____ City of Springfield, MA
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____ MAY 5 2020
Other Officer/Title: _____	Other Officer/Title: _____ Election Commission
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____

MEMBERS:

Member: <u>Bud L. Williams</u>	Member: <u>Jean Canosa Albano</u>
Residential Address: <u>155 Overlook Dr</u>	Residential Address: <u>111 W. Crystal Brook Dr</u>
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: <u>Springfield MA 01118</u>
Member: <u>MARY P. Conway</u>	Member: _____
Residential Address: <u>82 Pilgrim Rd</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: _____
Member: <u>Tony Taylor</u>	Member: _____
Residential Address: <u>1341 Plumtree Rd</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: _____
Member: <u>Mark Dorsey</u>	Member: _____
Residential Address: <u>101 Abbott St</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: _____
Member: <u>Richard J. Allen</u>	Member: _____
Residential Address: <u>94 Pondview Dr</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: _____
Member: <u>George Sampson</u>	Member: _____
Residential Address: <u>78 Dayton St.</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: _____
Member: <u>Bridget Haley</u>	Member: _____
Residential Address: <u>605 Roosevelt Ave</u>	Residential Address: _____
City / State / Zip: <u>Springfield MA 01118</u>	City / State / Zip: _____

ASSOCIATE MEMBERS:

Associate Member: _____	Associate Member: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Associate Member: _____	Associate Member: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Associate Member: _____	Associate Member: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____

(Attach an additional page, if necessary, with other officers, members and associate members.)

