

## The Commonwealth of Massachusetts ELECTED CITY, WARD AND TOWN POLITICAL COMMITTEE REPORT

(For Office Use Only)

NAME OF CITY/TOWN: Springfield		WARD (if applicable): City	
PARTY: <u>Democratic</u>		DATE OF REPORT: May 17, 2022	
INDICATE THE PURPOSE OF THIS REPORT BY	CHECKING THE APP	ROPRIATE BOX BELOW:	
	CHANGE OF ORFI		
Submit this report to the four offices listed below. File other three offices listed.	the original with the Off	ice of Campaign and Political Finance, and file copies of this report with the	
1. Office of Campaign and Political Finance One Ashburton Place, Room 411 Boston, MA 02108 (617) 979-8300 / (800) 462-OCPF (toll free in ocpf@cpf.state.ma.us / http://www.mass.gov/oc  3. State Party Committee Headquarters  City Ward Committee secretaries must also file a list of officer	MA) cpf	2. 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 4. City / Town Clerk or Election Commission	
PLEASE LIST BELOW THE NAME, RESIDE	NTIAL ADDRESS AN	ND ZIP CODE OF THE OFFICERS OF THIS COMMITTEE:	
Chairperson: Jesse L. Lederman		Secretary: Jynai McDonald	
Residential Address: 1090 Worthington Street		Residential Address: 187 Westminster Street	
City / State / Zip: Springfield	MA 01109	City / State / Zip: Springfield MA 01109	
Email: LedermanJL@gmail.com Phone	e#: 4133516785	Email: electjmcdonald@gmail.com Phone #: 4133319355	
Treasurer*: Devin Streeter		*A public employee may not serve as treasurer of any political committee.	
Residential Address: 187 Bowdoin Street		M.G.L. c. 55, s. 13 states that a person who is employed for compensation by the	
City / State / Zip: Springfield		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	
Email: dstreeter1911@gmail.com Phone	# 4137999216	serve as treasurers of any political committee. If you are unsure of your status, please contact OCPF for further guidance.	
accordance with Ch. 52, Sec. 5 of the Massachusetts G  I hereby accept the office of Treasurer of the above-nathat: 1) I am subject to certain duties and liabilities und	Secretary's signate med committee. I affirm the M.G.L. c. 55, including d of six years from the day.	that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand ng the timely filing of campaign finance reports and keeping detailed accounts ate of the relevant election; and 2) if after my acceptance of this office I signation.  Date: 5/17/22	

## NAME OF CITY / TOWN / WARD: Springfield Democratic City Committee LIST OTHER OFFICER'S NAMES, TITLES, RESIDENTIAL ADDRESSES AND ZIP CODES BELOW: Other Officer/Title: Shanique Spalding/ 1st Vice Chair Other Officer/Title: Joesiah Gonzalez/ 2nd Vice Chair Residential Address: 48 Benton Street Residential Address: 122 Massasoit Street City / State / Zip: Springfield 01109 City / State / Zip: Springfield 01107 Other Officer/Title: Linda Matys O'Connell/ Outreach Director Other Officer/Title: Residential Address: 235 State Street Apt. 116 Residential Address: City / State / Zip: Springfield City / State / Zip: 01103 MEMBERS: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: 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:

City / State / Zip:

Residential Address:

City / State / Zip: