

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance Fill in Reporting Period dates: Beginning Date: Ending Date: 8/30/2025 Type of Report: (Check one) ☐ 8th day preceding preliminary 8th day preceding election ☐ 30 day after election year-end report dissolution Jessica (Jessie) Ratev Committee to Elect Jessie Ratev Candidate Full Name (if applicable) Committee Name Somerville School Committee (Ward 3) Michelle Hermans Office Sought and District Name of Committee Treasurer 47 Church Street, Somerville, MA 02143 47 Church Street, Somerville, MA 02143 Residential Address Committee Mailing Address E-mail: jessieforward3@gmail.com E-mail: Phone #: 617-903-0711 SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report \$2,700.98 \$2,560.00 Line 2: Total receipts this period (page 3, line 12) \$5,260.98 Line 3: Subtotal (line 1 plus line 2) \$1,125.69 Line 4: Total expenditures this period (page 5, line 15) \$4,135.29 Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6, line 18) \$0 Line 7: Total (all) outstanding liabilities (page 7, line 19) \$0 1\$0 Line 8: Total out-of-pocket expenses this period (page 8, line 22) Rockland Trust Line 9: Name of bank(s) used: Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Michelle Hermans Wellle #PINON Date: 10/23/2025 Signed under the penalties of perjury: (Treasurer's signature) FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report. I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: \_(Candidate's signature)

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities.

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	Please see attached list	-	
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-			

STANDON NO.	THE PERSON NAMED IN									
Paid At		Donor First	Donor First Donor Last Nam Donor Address	Donor Address Line 1	Donor City	Donor State	DonorZIP	Joner Country	Donor ZIP Donor Country Donor Occupation	Donor Employee
9/23/2025 16:21 Stan	5 16:21	Stan	Cohen	4 Dillingham Way	Plymouth	MA	02360	United States	Mot Employed	viii in
0/27/2025 12:10 Back	E 19.10		Diffahio				05000	חוווכת חומוכם	Not Employed	Not employed
1211202	017710	1		39 Walnut Street, Apt B	Somerville	MA	02143	02143 United States	Deputy Chief of Staff	Commonwealth of Massachusette
/17/202	5 15:49	9/17/2025 15:49 Michael	Kaplan	335 Pethamdale Ave	Petham	×	10803	United States	Sales	Albora
111190	56 15.02	9/11/2026 16:02 Dhondup					200	Suited States	Sales	AIIIOI
2777	70.05	dnniioiio	FIIUIINIIAIIB	39 Buston Street	Somerville	MA	02143	United States	Builder	Splf
115/20	25 17:35	10/15/2025 17:35 Dhondup	Phunkhang	39 Boston Street	Somerville	MA	02143	02143 United States	Builder	200
DOLLAR	DE 00.44	Otomboule					01410	Same and Same	Duling	Dell
1754150	55.07.C7	SZ472023 20,44 Stephanie Hoberts		1062 Mass Ave	Lexington	MA	02420	United States	Psychologist	Mass General Brigham
9/5/20	9/5/2025 15:07 Bradley	Bradley	Taylor	64B Marshall St	Somerville	MA	02145-2922   Inited States	1	Coffusio continuos	The state of the s
14 1.100	00.04						22270 2222		Soliwale engineer	Editas Medicine
07/01/	10/15/2025 13:06 Julia	Julia	Ioulmin	79 Woodward Street	Newton	MA	02461	United States	President & CEO	Mott Philanthronic
/11//20	9/17/2025 21:43 Greta	Greta	Valenti	2809 13th Avenue South	Rirmingham	10		Partial Ototical	010000000000000000000000000000000000000	and a manual phic
					1000	75	22203	Onlied States	Researcher	University of Alabama at Birmingham
			A STATE OF THE PERSON NAMED IN COLUMN 1				-			

### SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			-
Line 10: Total Recei	pts over \$50 (or listed above)	\$1,950.00	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11
Line 11: Total Recei	pts \$50 and under (not listed above)	\$610.00	should include only those receipts not itemized above.
Line 12: TOTAL R	ECEIPTS IN THE PERIOD	\$2,560.00	← Enter on page 1, line 2

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	To Whom Paid			·
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
10/10/202 5	Amazon.com	440 Terry Ave N Seattle, WA 98109	Printing supplies (toner)	\$111.53
10/8/2025	Connolly Printing	17B Gill Street Woburn, MA 01801	Printed Materials	\$423.73
10/14/2025	Connolly Printing	17B Gill Street Woburn, MA 01801	Printed Materials	\$390.63
10/17/2025	United States Postal Service	18 Bow Street Somerville, MA 02143	Postage	\$122.00
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## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	
	( )	11441655	1 at pose of Expenditure	Amount
-				
		÷		
	·			
* If you have it	temized expenditures of \$50 ude them in line 13. Line 14	Line 13: Expenditures over \$50	(or listed above)	\$1047.89
should include	only those expenditures not emized above.	Line 14: Expenditures \$50 and u	inder (not listed above)	\$77.80
	Enter on page 1, line 4 $\rightarrow$	Line 15: TOTAL EXPENDITU	URES IN THE PERIOD	\$1,125.69

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and received of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
10/11/202 5	Michelle Hermans	22 Wyatt Street Somerville, MA 02143	Stamps to mail postcards	\$97.60
* If you have it	remized in-kind contributions of include them in line 16. Line 17	Line 16: In-Kind Contributions ove	97.60	
should includ	le only those expenditures not itemized above.	Line 17: In-Kind Contributions \$50	and under (not listed above)	\$0
	Enter on page 1, line 6 →	Line 18: TOTAL IN-KIND CONTI	RIBUTIONS IN THE PERIOD	\$97.60

### SCHEDULE D: LIABILITIES

 $M.G.L.\ c.\ 55$  requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				TO COMPANY TO THE PROPERTY OF
	Enter on page 1, line 7 →	Line 19: TOTAL OUTSTAND	ING LIABILITIES (ALL)	\$0

#### SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
	I I		
	·		
15			
or listed above)	d Out-Of-Pocket Expenditures Over \$50		* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21
Line 21: Total Unitem under (not listed above	ized Out-Of-Pocket Expenditures \$50 and		should include only those expenditures not itemized above.
Line 22: TOTAL OUT-O	PF-POCKET EXPENDITURES IN THE PERIOD	\$0	← Enter on page 1, line 8



## Form CPF M 102A: Amendment to Campaign Finance Report Municipal Form Office of Campaign and Political Finance

of Massachusetts File with: City or Town C	lark or Election Co	ommission				2025 OCT 27 PM	[2: 4]
					· · · D · · 1/1/2025	11 VI	8/29/2025
Report Being Amen	ided: Year:	2025	Reporting Period:	Beg	ginning Date: 1/1/2025	Ending Date:	8/29/2023
8th day preceding	g preliminary	8th	day preceding election		30 day after election	year-end report	dissolution
Jessica (Jessie) Rate	у				Committee to Elect Jess	ie Ratey	
47 Church Street, Sc	Candidate Full Na		able)		Michelle Hermans	Committee Name	
	Residentia				Na	me of Committee Treasurer	
Somerville School C			-	_	47 Church Street, Some		
	Office Sough	t and District			Co	ommittee Mailing Address	
E-mail:	jessieforwa	ard3@gma	il.com	_	E-mail:	*	
Phone # (optional):		(617) 903	-0711		Phone # (optional):		
			SUMMARY BAL	AN	CE INFORMATION:		
	Line 1:	Ending Ba	alance from previous re	port	·	0	
	Line 2:	Total rece	ipts this period			6,502.6	
	Line 3:	Subtotal				6,502.6	
	Line 4:	Total expe	enditures this period			3,801.62	
	Line 5:	Ending Ba	lance			2,700.98	
	Line 6:	Total in-k	ind contributions this p	erio	d	0	
	Line 7:	Total (all)	outstanding liabilities		***************************************	223.6	
	Line 8:	Name of b	oank(s) used: Rockland	d Tru	ıst		
The original filing of	the above-refe	renced car	npaign finance report is	s bei	ng amended for the follow	wing reason(s):	
Did not initially disc Please see attached s	na ngan ang panggana at at at 🗝 at at at at a	iture item	(\$74.59 tee shirt purch	ase).			
Signed under the penaltic	es of perjury:				Signed under the penalties	of perjury:	
1. R=	,The		ja s		Wieleson HA	NUM-	
(Candidate's signature)			Date: 10 26/2	3	(Treasurer's signature)	γ	Date: 10 26/21
/	1						-

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	To Whom Paid		D CF 114	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
0/0/15	Printify Inc.	108 West 13th St.	Campaign tec shirts	\$ 74.59
8/5/25	1111119 (10.	Milwington, 05 /0801		
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## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	(arphabetear asting)	Tradit ess	Turpose of Expenditure	
	140			
	M.C.			
			*	
* If you have and under, inc	itemized expenditures of \$50 clude them in line 13. Line 14	Line 13: Expenditures over \$50	(or listed above)	\$74.59
should include	e only those expenditures not itemized above.	Line 14: Expenditures \$50 and u	nder (not listed above)	
	Enter on page 1, line $4 \rightarrow$	Line 15: TOTAL EXPENDITU	URES IN THE PERIOD	13801.62