

Municipal Clerk Info:
 Sue Cote, City Clerk
 Email: shcote@sanfordmaine.org
 (207) 608-4165

CANDIDATE REGISTRATION

SEP 19 '22 PM 1:46 *

Notice: Changes to registration information must be filed the Clerk's Office within 10 days of the change. Changes may be filed on this form by checking "Yes" below, by writing to the Clerk's Office or by e-mail to the Clerk's Office.

Is this an amendment? Yes No

1. CANDIDATE INFORMATION		
Title (optional): <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Hon.	Party Affiliation (if any): Republican	Office Sought: School Committee
Name: Thomas R. Miscio		District (if any): At Large
Mailing Address: 131 Milton Ave		Phone (home): 603-496-0052
City, State, Zip Code: Sanford ME 04073		Phone (work):
E-mail: tommiscio@rocketmail.com	Fax:	Phone (mobile):
2. TREASURER INFORMATION		
Name: Thomas Miscio		Phone (home): 603-496-0052
Mailing Address: 131 Milton Ave		Phone (work):
City, State, Zip Code: Sanford ME 04073	E-mail: tommiscio@rocketmail.com	Fax:
<p>DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRSA §§ 1013-A)</p>		
3. DEPUTY TREASURER INFORMATION		
Name:		Phone (home):
Mailing Address:		Phone (work):
City, State, Zip Code:		E-mail:
<p>DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRSA § 1013-A (1)(A)(1))</p>		

4. POLITICAL COMMITTEE INFORMATION	
Name:	Phone:
Address of Campaign Headquarters:	City, State, Zip Code:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRSA § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City, State, Zip Code:	E-mail:
Name:	Title:	Phone:
Mailing Address:	City, State, Zip Code:	E-mail:

5. CERTIFICATION
(Must be signed even if exemption below is claimed)

I, Thomas Misco, certify that the information in this registration is true, accurate and complete.
(Print Candidate's Full Name)

Signature of Candidate: *Thomas Misco* Date: 9/19/22

6. EXEMPTION FROM REPORTING REQUIREMENTS

A reporting exemption relieves the candidate of the obligation to appoint a treasurer and file campaign finance reports. To obtain an exemption, the candidate must notify the Clerk in a sworn and notarized statement (below) that he/she will not accept contributions (including in-kind), make expenditures or incur financial obligations associated with the candidate's candidacy. **PLEASE NOTE:** personal funds of the candidate used for campaign purposes are considered campaign contributions/ expenditures under Maine law. Hence, a candidate who uses such funds to support his/her candidacy is not eligible for a reporting exemption.

NOTICE OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.

Signature of Candidate: _____ Date: _____

Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____

Seal (optional) _____ Signature: _____
Notary Public/Attorney-at-law

My commission expires (date): _____

REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.

Sworn Falsification is a Class D crime. (17-A MRSA § 453)

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SEP 21 '22 PM 4:15 #

CANDIDATE REGISTRATION

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Is this an amendment? Yes No

1. CANDIDATE INFORMATION		
Title (optional): <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Hon.	Party Affiliation (if any): Republican	Office Sought: School Committee
Name: Melissa Simpson		District (if any): At Large
Mailing Address: 499 Twombly Rd		Phone (home): 207-636-6794
City, State, Zip Code: Sanford Me 04073		Phone (work):
E-mail: melissa.homesolutions@gamil.com	Fax:	Phone (mobile):
2. TREASURER INFORMATION		
Name: Melissa Simpson		Phone (home): 207-636-6794
Mailing Address: 499 Twombly Rd		Phone (work):
City, State, Zip Code: Sanford Me 04073	E-mail: melissa.homesolutions@gmail.com	Fax:

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3. DEPUTY TREASURER INFORMATION	
Name:	Phone (home):
Mailing Address:	Phone (work):
City, State, Zip Code:	E-mail:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRSA § 1013-A (1)(A)(1))

4. POLITICAL COMMITTEE INFORMATION	
Name:	Phone:
Address of Campaign Headquarters:	City, State, Zip Code:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRSA § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City, State, Zip Code:	E-mail:
Name:	Title:	Phone:
Mailing Address:	City, State, Zip Code:	E-mail:

5. CERTIFICATION (Must be signed even if exemption below is claimed)

I, Melissa Simpson, certify that the information in this registration is true, accurate and complete.
(Print Candidate's Full Name)

Signature of Candidate: Melissa Simpson Date: 9-21-22

6. EXEMPTION FROM REPORTING REQUIREMENTS

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NOTICE OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.

Signature of Candidate: _____ Date: _____

Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____

Signature: _____
Notary Public/Attorney-at-law

Seal (optional)

My commission expires (date): _____

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SEP 22 '22 PM 5:12 *

CANDIDATE REGISTRATION

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Is this an amendment? Yes No

Title (optional): <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Hon.		Party Affiliation (if any): Republican	Office Sought: School Committee
Name: Kelly Ann Termath		District (if any):	
Mailing Address: 34 Brunelle Ave		Phone (home): 207-459-9201	
City, State, Zip Code: Sanford, ME 04073		Phone (work): Same -	
E-mail: k.termath@yahoo.com	Fax:	Phone (mobile): 207-459-9201	

Name: Michael William Termath		Phone (home): 207-337-1776	
Mailing Address: 34 Brunelle Ave		Phone (work): Same -	
City, State, Zip Code: Sanford, ME 04073	E-mail: mw.termath@gmail.com	Fax:	

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Name:		Phone (home):	
Mailing Address:		Phone (work):	
City, State, Zip Code:		E-mail:	

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRSA § 1013-A (1)(A)(1))

Name:	Phone:
Address of Campaign Headquarters:	City, State, Zip Code:

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Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City, State, Zip Code:	E-mail:
Name:	Title:	Phone:
Mailing Address:	City, State, Zip Code:	E-mail:

I, Kelly Ann Ternath, certify that the information in this registration is true, accurate and complete.
(Print Candidate's Full Name)

Signature of Candidate: Kelly A Ternath Date: Sept 22, 2022

A reporting exemption relieves the candidate of the obligation to appoint a treasurer and file campaign finance reports. To obtain an exemption, the candidate must notify the Clerk in a sworn and notarized statement (below) that he/she will not accept contributions (including in-kind), make expenditures or incur financial obligations associated with the candidate's candidacy. **PLEASE NOTE:** personal funds of the candidate used for campaign purposes are considered campaign contributions/expenditures under Maine law. Hence, a candidate who uses such funds to support his/her candidacy is not eligible for a reporting exemption.

NOTICE OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.

Signature of Candidate: _____ Date: _____

Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____

Seal (optional) Signature: _____
 Notary Public/Attorney-at-law

My commission expires (date): _____

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