(For Office Use Only)



## Form CPF 101: STATEMENT OF ORGANIZATION CANDIDATE'S 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 www.mass.gov/ocpf

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

<b>CANDIDATE:</b>	First Name: Said	N	Middle Nam	e / Initial: Hassan		Last Name: Ahmed		
	Residential Address: 1 Gurney Street							
	City / State / Zip: Boston MA 02120							
	Email Address: saidahmed330@gmail.com							
	Party Affiliation: (if	applicable) Democratic			Phone #:	617-749-6502		
OFFICE SOUG	GHT/PURPOSE:							
	Title:	City Councilor			-0	100	•	
	District:	City Councilor, Boston			C	ARI		
				<b>20</b> ,		· · · · · · · · · · · · · · · · · · ·		
COMMITTEE:	Name of Committee	Anmed Committe		X		<u>8</u> .		
	(The name of the committee must include the candidate's last name)  Committee Mailing Address: 1543 Columbus Ave							
	Committee Maning I	1542 Columbus	Ave 7					
OFFICERS:	City / State / Zip:	Boston	20.	MA 0	2119			
	Said Hassan Ahme	d		Treasurer*:	Patrio	ck E. O'Connor		
Residential Address:	1 Gurney Street	MP.		Residential Addres	s: 650 H	Huntington Ave 11B		
City / State / Zip:	Boston	MA 0212	20	City / State / Zip:	Bosto	on	MA	02115
Email:	saidahmed330@gm	nail.com		Email:	peoco	onnor2@yahoo.com		
Phone #:	617-749-6502			Phone #:	<u> </u>	617-784-7212		
_	* A	public employee may not ser	rve as treasi	urer of any political	l committ	ee (see reverse).		
behalf. I am aware the relevant election	that candidates are re-	mittee. I understand that a c quired to keep detailed acco						
		Candidate's signature:	Said H A	hmed			Date:	10/21/2024
that: 1) I am subject and records of all ca	to certain duties and impaign finance activ iployee, I must resign	the above-named committee liabilities under M.G.L. c. s ity for a period of six years this position and notify OC	ee. I affirm 55, including from the d	ng the timely filing ate of the relevant	g of camp election	paign finance reports and it; 2) if after my acceptance	keeping do	etailed accounts fice I become an
SIGNED UNDER T	THE PENALTIES OF	PERJURY:						
		Treasurer's signature:	Patrick E	OConnor			Date:	10/21/2024
			(Electronic	e signature)				
	office of Chair of the THE PENALTIES OF	above-named committee. FPERJURY:						
		Chair's signature:	Said H A	Ahmed			Date:	10/21/2024

(Electronic signature)