



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:

CANDIDATE:	First Name: LATO	YA		Middle Nam	e / Initial:	Las	st Name: GAYLE			
	Residential Address	54 Samoset St								
	City / State / Zip: Boston					MA 02124				
	Email Address:	Latoyaforsenate@gmail.com					700			
	Party Affiliation: (if applicable)				Phone #: 617-259-7565					
OFFICE SOU	GHT/PURPOSE	•								
OFFICE SOUC	Title:						•			
	District:	State Senator			50"					
	District:	Senate, 1st Suffolk				·	0			
COMMITTEE	• Name of Committee	GAYLE COI			760		9.			
	Committee Mailing			of the comm	ittee must include the o	candidate's las	st name)			
OFFICERS:	City / State / Zip:	Boston		1	MA 02	124				
	LATOYA GAYLE		~?	100	Treasurer*:	Jennifer L	arson			
Residential Address:	54 Samoset St		16.	<u>'</u>	Residential Address:	4 Centerv	rale Park			
City / State / Zip:	Boston	MA	0212	24	City / State / Zip:	Boston		MA	02124	
Email:	Latoyaforsenate@gmail.com				Email:	larson.jen	n@gmail.com			
Phone #:	617-259-7565				Phone #:		(617) 417-2188			
_	* A	public employee may	not sei	rve as treas	urer of any political c	committee (se	ee reverse).			
behalf. I am aware the relevant election	the filing of this com that candidates are re n. THE PENALTIES OI	equired to keep detail								
		Candidate's sign	nature:	LATOYA				Date:	12/1/2025	
that: 1) I am subject and records of all ca	office of Treasurer of to certain duties and ampaign finance activ aployee, I must resign d on his/her behalf.	liabilities under M.C vity for a period of six	G.L. c. : x years	ee. I affirm 55, including from the d	ng the timely filing of late of the relevant e	of campaign lection; 2) if	finance reports and fafter my acceptanc	keeping de	etailed accounts fice I become an	
SIGNED UNDER T	THE PENALTIES OF	F PERJURY:								
Treasurer's signature:				Jennifer				Date:	12/1/2025	
I hereby accept the	office of Chair of the	ahove-named comm	ittee	(Electroni	c signature)					
	THE PENALTIES OF	F PERJURY:								
		Chair's signa	iture:	LATOYA				Date:	12/1/2025	
				(Electroni	c signature)					