Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300

Candidate or Committee Thomas Sullivan **Year** 2015

Report: ___ Pre-Preliminary ✓ Pre-Election ___ 30-Day ___ Year-End

Organization / Providing Materials / Notification *

___ Organizational form provided to candidate or committee (M101, M101BQ, M101PC)

✓ Campaign finance report form provided to candidate or committee (M102)

___ Summary of the campaign finance law provided (OCPF guide booklet)

___ Filing notice (includes reporting dates, due dates and language concerning late fines)

___ Pre-Preliminary ✓ Pre-Election ___ 30-Day ___ Year-end

**All forms, guides and notices can be delivered by e-mail*

Inspecting Reports

The campaign finance law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date.

✓ Correct dates for the relevant reporting period

✓ Signatures

✓ Positive ending balance

___ If the **M102-0** form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence.

Contributions (Monetary receipts and in-kind contributions)

✓ **Names and Addresses** for contributions of more than $50

✓ **Occupation and Employer** for contributions of $200 or more

✓ No contributions from corporations, business partnerships, LLCs or LLPs

✓ No contributions from individuals or PACs for more than $500 (see OCPF's limits chart for other limits)

Expenditures

✓ Vendor Names and Addresses for expenditures of more than $50

✓ Purpose information is disclosed

___ Reimbursements form (R-1s) filed for reimbursements

Date of Inspection 10/26/15

Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

2015OCT26AM09:06HAV*CITYC

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2015 Ending Date: 10/16/2015

Type of Report: (Check one)

☑ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Candidate Full Name (if applicable): Thomas J. Sullivan

Office Sought and District: City Council

Residential Address: 77 Longview St. Haverhill MA 01830

Telephone Number (optional): 978 314 2925

Committee Name: Committee to Elect Thomas J. Sullivan

Name of Committee Treasurer: Paul Accaroi

Committee Mailing Address: 495 Main St Haverhill MA 01830

Telephone Number (optional): 978 372-8910

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	410.34
Line 2: Total receipts this period (page 3, line 11)	8652.48
Line 3: Subtotal (line 1 plus line 2)	9062.82
Line 4: Total expenditures this period (page 5, line 14)	2854.39
Line 5: Ending Balance (line 3 minus line 4)	6208.43
Line 6: Total in-kind contributions this period (page 6)	—
Line 7: Total (all) outstanding liabilities (page 7)	—
Line 8: Name of bank(s) used:	Haverhill Bank

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.

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: 10/23/15

FOR CANDIDATE FILINGS ONLY: **Affidavit of Candidate: (check 1 box only)**

☑ **Candidate with Committee and no activity independent of the 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.

☐ **Candidate without Committee OR Candidate with independent activity filing separate 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: 10/23/15

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over $50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over $50. In addition, the occupation and employer must be reported for all persons who contribute $200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
	SEE ATTACHED		

Line 9: Total Receipts over $50 (or listed above)	4925-
Line 10: Total Receipts $50 and under* (not listed above)	3727.48
Line 11: TOTAL RECEIPTS IN THE PERIOD	8652.48 ← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued) N/A

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)

Line 9: Total Receipts over $50 (or listed above)	
Line 10: Total Receipts $50 and under* (not listed above)	
Line 11: TOTAL RECEIPTS IN THE PERIOD	

← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over $50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over $50. Expenditures $50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	SEE ATTACHED			

Line 12: Total Expenditures over $50 (or listed above)	2854.39
Line 13: Total Expenditures $50 and under* (not listed above)	—
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	2854.39

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued) N/A

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

	Line 12: Expenditures over $50 (or listed above)	
	Line 13: Expenditures $50 and under* (not listed above)	
Enter on page 1, line 4 →	**Line 14: TOTAL EXPENDITURES IN THE PERIOD**	

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than $50. In-kind contributions $50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	NONE			

Line 15: In-Kind Contributions over $50 (or listed above)	
Line 16: In-Kind Contributions $50 & under (not listed above)	
Enter on page 1, line 6 → **Line 17: TOTAL IN-KIND CONTRIBUTIONS**	

* If an in-kind contribution is received from a person who contributes more than $50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is $200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
	None			

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**

COMMITTEE TO ELECT THOMAS J. SULLIVAN

SCHEDULE A: RECEIPTS

NAME AND RESIDENTIAL ADRESS	AMOUNT	OCCUPATION/EMPLOYER
AMARI, SAMUEL, 89-93- KENOZA AVENUE, HAVERHILL, MA	100.00	
AMBRA, MICHELLE, 212 NEWTON ROAD, HAVERHILL, MA	100.00	
BEATON, CHRISTINE, 328 AMESBURY LINE ROAD, HAVERHILL, MA	100.00	
BLINN, NELSON, 60 BAILEY BOULEVARD HAVERHILL, MA	100.00	
CHEMALY, JOHN P., BOX 187, LOWELL, MA	500.00	CEO/ TRINITY AMBULANCE
COLLYER, MARK, 77 LONGVIEW STREET, HAVERHILL, MA	100.00	
COX, WILLIAM, 145 SOUTH MAIN ST, BRADFORD, MA	250.00	ATTORNEY, SELF EMPL.
DEMPSEY, BRIAN, COMMITTEE, 15 OXFORD STREET, HAVERHILL	100.00	
DIBURRO, ERNEST BOX 5068, BRADFORD, MA	150.00	
DICK, CHRISTOPHER, 187 CATAMOUNT ROAD, TEWKSBURY, MA	150.00	
DONAHUE, SUSAN, 83 LONGVIEW STREET, HAVERHILL, MA	100.00	
EDWARDS, JOSEPH, 54 MONUMENT STREET, HAVERHILL, MA	150.00	
FARRELL, VICTORIA, 6 MAIN STREET, GROVE,AND, MA	100.00	
FLYNN, STEPHEN, 269 CENTRAL STREET, GEORGETOWN, MA	100.00	
GUERIN, JEFFREY, 15 BLOSSOM STREET, BRADFORD, MA	150.00	
GUERIN, JOHN, 26 LEROY AVENUE, BRADFORD, MA	200.00	EXECUTIVE/OPPORT.WORKS
HOGAN, KELLY, 828 AMESBURY ROAD, HAVERHILL, MA	100.00	
JAJUGA, JAMES P. 146 FOREST STREET, METHUEN, MA	100.00	
KEMPER, ROBERT, 86 MILL STREET, HAVERHILL, MA	100.00	
KITTREDGE, ANDREA, 9 TECUMESH DRIVE, BREADFORD, MA	100.00	
LICARI, SHARON, 8 FAIRVIEW FARM ROAD, HAVERHILL, MA	150.00	
MACDOUGALL, OLIVE, 384 KENOZA AVE, HAVERHILL, MA	100.00	
MEIDANIS, ROBERT, 92 MERRIMACK STREET, HAVERHILL, MA	100.00	
MIGLIORI, MICHAEL, 18 ESSEX STREET, HAVERHILL, MA	100.00	
MORIARTY, GEORGE, 11 SHERIDAN STREET, HAVERHILL, MA	100.00	
OCONNOR IVES, KATY, BOX 121, NEWBURYPORT, MA	100.00	
O'CONNOR, MARY, BOX 5134, BRADFORD, MA 01835	250.00	
PONDELLI, ROBERT, BOX 23, TEWKSBURY, MA	100.00	
SAINI, SOHAN, 428 MAIN STREET, HAVERHILL, MA	100.00	
SARAGAS, VASSO, 15 WABANAKI WAY, ANDOVER, MA	100.00	
SEPE, GARY, 1221 WESTFORD STREET, LOWELL, MA	500.00	CFO/TRINITY AMBULANCE
STAPINSKI, STEPHEN, 12 APACHE AVE, ANDOVER, MA	100.00	
SULLIVAN , NICHOLAS, 297 S. MAIN STREET, BRADFORD, MA	100.00	
VALVO, MICHAEL, 262 MILL STREET, HAVERHILL, MA	75.00	
VINCI, PETER, 162 LOWELL AVE, HAVERHILL , MA	100.00	
TOTAL RECEIPTS IN EXCESS OF $50	4925.00	
TOTAL RECEIPTS $50 AND UNDER	3727.48	
TOTAL RECEIPTS IN THIS PERIOD	8652.48	

COMMITTEE TO ELECT THOMAS J. SULLIVAN

SCHEDULE B: EXPENDITURES

DATE PAID	TO WHOM PAID	ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT
10/13/2015	EAGLE TRIBUNE	RTE 114, NORTH ANDOVER, MA	ADVERTISING	1,247.40
10/16/2015	HAV DEM CITY COMM	145 SO MAIN STREET, BRADFORD, MA	DONATION	100.00
09/25/15	LASTING ROOM	WASHINGTON STREET,HAVERHILL, MA	CATERING FUNDRAISER	250.00
10/03/15	PAPER POPURRI	93 BROADWAY, HAVERHILL, MA	INVITATIONS	300.00
10/01/15	THRIFTCO PRINTING	26 HOWLEY STREET PEABODY, MA	PRINTING	511.70
10/16/2015	THRIFTCO PRINTING	26 HOWLEY STREET PEABODY, MA	SIGNS	445.29
LINE 12	EXEPENDITURES OVER $50			2,854.39
LINE 13	EXPENDITURES $50 AND OVER			0.00
LINE 14	TOTAL EXPENDITURES			2,854.39