

Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/07/2024 Ending Date: 02/12/2024

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)
Office Sought and District
Residential Address
E-mail: _____
Phone #: _____

Yes for Whittier

Committee Name

Joan Sweeney

Name of Committee Treasurer

C/O North Side Ventures PO Box 9536, Lowell, MA

Committee Mailing Address

E-mail: yesforwhittiercomp@northsideventures.comPhone #: 5088781857**SUMMARY BALANCE INFORMATION:**

Line 1: Ending Balance from previous report	<u>\$5,000.00</u>
Line 2: Total receipts this period (page 3, line 12)	<u>\$85,000.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$90,000.00</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>\$89,900.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$100.00</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>\$0.00</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>\$1,153.00</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>\$0.00</u>
Line 9: Name of bank(s) used:	<u>Amalgamated Bank</u>

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: Joan Sweeney (Treasurer's signature)Date: 2/22/2024**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.

Candidate without 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, 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)

Date: _____

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 E 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)
1/16/2024	Build New England Fund 410 S Main St, Providence, RI 02903	\$25,000.00	N/A
1/22/2024	Consigli Construction Co. Inc. 72 Sumner St., Milford, MA 01757	\$25,000.00	N/A
1/29/2024	North Atlantic Regional Council of Carpenters PAC	\$25,000.00	N/A - 750 Dorchester Ave, Ste 3100 Boston, MA 02125
1/18/2024	LeftField Project Management 101 Federal St, Boston, MA 02110	\$5,000.00	N/A
1/22/2024	Select Demo Services, LLC 40 Lowell Rd., Salem, NH 03079	\$2,500.00	N/A
1/22/2024	Select Paint Finishes, LLC 40 Lowell Rd., Salem, NH 03079	\$2,500.00	N/A

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 Receipts over \$50 (or listed above)		\$85,000.00	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>
Line 11: Total Receipts \$50 and under (not listed above)		\$0.00	
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$85,000.00	

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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 D. 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	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2/6/2024	North Side Ventures LLC	PO Box 9536 Lowell, MA 01853	Compliance Consulting (no subvendor used)	3,000.00
1/30/2024	Shamut Strategies Group	11 Beacon St Ste 1125 Boston, MA 02108	Consulting, advertising, mailing, printing	54,548.65
2/6/2024	Shawmut Strategies Group	11 Beacon St Ste 1125 Boston, MA 02108	Consulting, advertising, mailing, printing, texting	32,351.35

SCHEDULE B: EXPENDITURES (continued)[illegible]

** If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.*

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)

\$0.00

Line 14: Expenditures \$50 and under (not listed above)

\$0.00

Line 15: TOTAL EXPENDITURES IN THE PERIOD

\$0.00

[illegible]

\$0.00

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
12/31/2023	Shawmut Strategies Group	11 Beacon St Ste 1125 Boston, MA 02108	Consulting, advertising, mailing, printing	25,641.45
1/30/2024	Shawmut Strategies Group	11 Beacon St Ste 1125 Boston, MA 02108	Consulting, advertising, mailing, printing	-25,641.45
2/12/2024	Shawmut Strategies Group	11 Beacon St Ste 1125 Boston, MA 02108	General consulting	1,153.00
Enter on page 1, line 7 → Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)				\$1,153.00

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
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)		\$0.00	<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i>
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)		\$0.00	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		\$0.00	

← Enter on page 1, line 8

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Commonwealth
of Massachusetts

Form CPF SV-1 (M): Report of Subvendor Payments
(Municipal)

Office of Campaign and Political Finance

File with: Local Election Official

Please itemize any payments made to subvendors by detailing the date, payee, address, purpose and amount for each expenditure made by the vendor whom you contracted with for goods and/or services.

Filer Name: Yes for Whittier

Name of Original Vendor: Shawmut Strategies Group

Date of payment: 1/30/2024 - 2/6/2024Total amount of payment: \$86,900.00

ITEMIZE SUBVENDOR PAYMENTS (OR LIABILITIES INCURRED) OF \$500 OR MORE

Date Paid	Subvendor Name	Subvendor Address	Purpose of Expenditure	Amount
	SEE ATTACHED	SEE ATTACHED	SEE ATTACHED	

(Attach additional pages, if necessary.)

Line 1: Total Itemized Subvendor Expenditures (itemized above):

\$60,653.00

Signed under the penalties of perjury:

DocuSigned by:
Joan Sweeney

Signature

Date: 2/22/2024

Name: Joan Sweeney

(Include title if signing on behalf of a group)

Please prepare a separate report for each check issued to a vendor who made subvendor payments.

Date Paid	Subvendor Name	Address	Purpose	Amount
1/18/24	Dennis Newman	580 Pearl St., Reading, MA 01867	Recount Lawyer retainer	\$750
1/19/24	Eagle Tribune	100 Turnpike St., N Andover, MA 01845	2 full-page ads and 2 days of digital full-page	\$5,369
1/18/24	Freestone Communications	10 Fiddler Pond, Beaufort, SC 29907	Paid ID Calls	\$1,664
1/18/24	Freestone Communications	10 Fiddler Pond, Beaufort, SC 29907	PAID GOTV Calls	\$2,624
1/16/24	Costa Eagle Broadcasting	462 Merrimack St., Methuen, MA 01844	Advertising - Haverhill Spanish radio	\$375
1/10/24	L2, Inc.	5 Schalks Crossing Rd., Plainsboro, NJ 08536	Data Match	\$600
12/31/23	MailChimp	675 Ponce de Leon Ave NE Ste 5000, Atlanta, GA 30308	MailChimp	\$200
1/19/24	Newburyport News	23 Liberty St., Newburyport, MA 01950	1 full-page ad and 1 day of digital full-page	\$2,066
1/16/24	Peerly	303 Williams Ave SW Ste 821, Huntsville, AL 35801	Texting	\$4,727
1/7/24	Simpli.Fi	128 East Exchange Ave Ste 700, Fort Worth, TX 76164	Digital Ads	\$7,000
1/2/24	Standard Modern	186 Duchaine Blvd., New Bedford, MA 02745	Mailing #1	\$7,199
1/10/24	Standard Modern	186 Duchaine Blvd., New Bedford, MA 02745	Mailing #2	\$9,024
1/10/24	Standard Modern	186 Duchaine Blvd., New Bedford, MA 02745	Mailing #3	\$9,044
1/17/24	Standard Modern	186 Duchaine Blvd., New Bedford, MA 02745	Mailing #4	\$7,098
1/8/24	Standard Modern	186 Duchaine Blvd., New Bedford, MA 02745	Palmcard	\$880
12/31/23	TargetSmart	1155 15th St NW #750, Washington, DC 20005	Voter File	\$1,063
1/17/24	WHAV	30 How St., Haverhill, MA 01830	30 sponsored radio spots	\$870
12/31/23	Wix	500 Terry A Francois Blvd, San Francisco, CA 94158	Website Hosting/URL	\$100
			Total	\$60,653