



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:

12/31/22

Ending Date:

10/27/23

Type of Report: (Check one)

☒ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Gail Marie Sullivan
Candidate Full Name (if applicable)
Ward 2 School Committee
Office Sought and District
18 Hawthorne St. Haverhill
Residential Address
E-mail: gms62345@gmail.com
Phone # (optional):

CTE Gail M Sullivan
Committee Name
Caroline LeBlanc
Name of Committee Treasurer
16 Blossom St. Haverhill
Committee Mailing Address
E-mail: Cgg95@verizon.net
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1,498.16

Line 2: Total receipts this period (page 3, line 11)

256.00

Line 3: Subtotal (line 1 plus line 2)

1,748.16

Line 4: Total expenditures this period (page 5, line 14)

1,715.00

Line 5: Ending Balance (line 3 minus line 4)

33.16

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

735

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:

Caroline LeBlanc

(Treasurer's signature)

Date: 10/27/23

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:

Gail M Sullivan

(Candidate's signature)

Date: 10/27/23

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)
10/23	Richard Rosa 139 Kenosza Street	250.00	SELF Employed Business Owner
Line 9: Total Receipts over \$50 (or listed above)		250	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		250	

* 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/21/23	Staples	58 Plaistow Rd Plaistow	Post card stock	19.00
10/25/23	Postage	P.O. Bradford	Mailing	20.00
10/23/23	Postage	P.O.	" "	25.00
10/14/23	Connolly Printing	178 Grill St. Woburn Ma	Post cards	956.08
10/02/23	" "	" "	Door hanger	635.00
10/14/23	" "	" "	tax	60.00
Line 12: Expenditures over \$50 (or listed above)				1,715
Line 13: Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,715

Enter on page 1, line 4 →

* 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.

[illegible]

* 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
10/21/19	Gail Sullivan (loan)	18 Hawthorne St	Ad	310
8/19/19	" "	" "	"	50
6/21/19	" "	" "	" "	300
10/21/19	" "	" "	Rental Fee For Fundraiser	75
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				735.00