



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

JAN 24 PM 12:12
HANCITYCLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2024 Ending Date: 12/31/2024

Type of Report: (Check one)

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

Yonnie Collins
Candidate Full Name (if applicable)
School Committee Ward 6
Office Sought and District
52 Greenough St Haverhill MA 01832
Residential Address
E-mail: collinsyonnie@gmail.com
Phone # (optional): 978-228-4174

Yonnie Collins for School Committee
Committee Name
Doral Jones
Name of Committee Treasurer
12 Quincy St Methuen MA 01844
Committee Mailing Address
E-mail: jonesdoral@yahoo.com
Phone # (optional): 978-885-6913

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,312.04
Line 2: Total receipts this period (page 3, line 11)	6,510.1
Line 3: Subtotal (line 1 plus line 2)	7,822.14
Line 4: Total expenditures this period (page 5, line 14)	5,948.28
Line 5: Ending Balance (line 3 minus line 4)	1,873.86
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
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: Doral Jones (Treasurer's signature) Date: 1/18/2025

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: [Signature] (Candidate's signature)

Date: 01/23/25

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)
4/3/2024	Cheretta Tate 82 Jackson St Lawrence MA 01841	50	
2/15/2024	Colleen Ray 14 Chadwick Rd Haverhill MA 01835	50	
4/4/2024	Richard Early Jr 50 S Main St Haverhill MA 01835	100	
4/4/2024	Eridania Nieves 70 Washington St unit 103 Haverhill MA 01832	50	
4/4/2024	Eunice Zeigler 25 North St Methuen MA 01844	75	
3/4/2024	Joanitah Zawedde 1414 Arboretum Way Burlington MA 01803	50	
2/24/2024	Lynda Brown 26 Windsor St Haverhill MA 01830	100	
4/4/2024	Madia Cooper 52 Greenough St Haverhill MA 01832	100	
4/4/2024	Melinda Barrett 18 Salem St Haverhill MA 01835	100	
4/4/2024	Michael Hughes 100 Montclair Rd Haverhill MA 01830	50	
4/4/2024	Paul Magliocchetti 15 Kimball Hill Dr Haverhill MA 01830	100	
4/5/2024	Peter Alves 7 Leroy Ave Atkinson NH 03811	50	
Line 9: Total Receipts over \$50 (or listed above)		875	
Line 10: Total Receipts \$50 and under* (not listed above)		260	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,135	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/4/2024	Rosamond Perkins 68 Dover St Apt 5 Lowell MA 01851	50	
4/4/2024	Sharon Coffin 56 Rainbow Dr Haverhill MA 01835	200	Vice President Operations Healthcare Pinnacle Medical Group
4/4/2024	Stephanie Beaute 368 Great Road N Smithfield RI 02896	50	
3/5/2024	Stephen Gordon 1137 Main St Haverhill MA 01830	75	
4/3/2024	Tracy Fuller 97 Beechwood Dr Haverhill MA 01832	100	
2/10/2024	William Taylor 51 Sheridan Street Haverhill MA 01830	50	
4/4/2024	William Taylor 51 Sheridan Street Haverhill MA 01830	50	
4/4/2024	Yonnie Collins 52 Greenough St Haverhill MA 01832	1,550	Purchase of food and event space for Fundraiser (used personal debit card for food and event space)
4/4/2024	Yonnie Collins 52 Greenough St Haverhill MA 01832	2,800.1	Purchase of decorations for Fundraiser (used personal debit card for decorations)
4/4/2024	Yonnie Collins 52 Greenough St Haverhill MA 01832	450	Purchase of entertainment for Fundraiser (used personal debit card for entertainment)
Line 9: Total Receipts over \$50 (or listed above)		5,375.1	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5,375.1	← 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
	Act Blue	Actblue.com	Feb - April Credit Card Fees	53.01
4/4/2024	Afro - Infused	30 Emerson St Haverhill MA 01830	Purchase of food and event space for fundraiser	1,550
4/4/2024	Icy Decor	30 Myona St Methuen MA 01844	Purchase of decorations for fundraisers	2,800.1
4/4/2024	Icy Decor	30 Myona St Methuen MA 01844	Purchase of decorations for fundraisers	1,000
4/4/2024	Collins Bozue	69 Bradlee Rd Milton MA 02186	Purchase of entertainment for fundraisers	450
Line 12: Total Expenditures over \$50 (or listed above)				5,853.11
Line 13: Total Expenditures \$50 and under* (not listed above)				95.17
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				5,948.28

* 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)[illegible]

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 6 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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0