

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Jain	vary 1 Ending Date: October 17 2025
Type of Report: (Check one)	1
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
	THE THE PARTY OF T
Toni Sapienza-Donais Candidate Full Name (if applicable) Haverhill School Committee At Large Office Sought and District 100 S Park Street Residential Address E-mail: tonidonais@yahoo.com Phone #: 978 228 0643	Committee to Fleet Toni Sapienza-Donas Committee Name Melissa Donais Name of Committee Treasurer 100 S Park St Haverhill, MA 01835 Committee Mailing Address E-mail: tonidonais@yahco.com Phone #: 978 238 0643
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	\$ 336.21
Line 2: Total receipts this period (page 3, line 12)	\$ 790,00
Line 3: Subtotal (line 1 plus line 2)	\$' 1,1 26,21
Line 4: Total expenditures this period (page 5, line 15)	\$ 886. 25
Line 5: Ending Balance (line 3 minus line 4)	# 239.96
Line 6: Total in-kind contributions this period (page 6, 1	line 18)
Line 7: Total (all) outstanding liabilities (page 7, line 19	\$ 3,136.89
Line 8: Total out-of-pocket expenses this period (page 8	, line 22)
Line 9: Name of bank(s) used: Haverhill	Bank
activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: October 23 2025 x only) best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period that are not otherwise disclosed in this report.
I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements	

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.

(Candidate's signature)

SCHEDULE A: RECEIPTS

4.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 ear. 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 o 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 ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eceived. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities.

Ittach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

nch additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page. Name and Residential Address Occupation & Employer					
Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)		
9/2/2025	Dick Early 539 Boxford Road Havermil, ma	500	Early Contractors Inc President: Dick Early		
9/11/2035	Scott Wood 93 Lawrence ST HAVETHILL, MA	200	ALL SPORTS BREAKS U.C.		
9/12/2025	William Ryan 16 Concord St Haverhill, MA	50			
10/13/2025	Maria Fountaine So Broadway HAVERHILL, MA	40			
			,		
	- 10				

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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	The state of the s	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
-			
Line 10: Total Rece	eipts over \$50 (or listed above)	790	* If you have itemized receipts of \$50 and
Line 11: Total Rece	eipts \$50 and under (not listed above)		under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 12: TOTAL	RECEIPTS IN THE PERIOD	790	← 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 E. 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
1/30/25	Haverhill Bank	180 Merrimack ST Haverhill, MP	monthly fixed charge for ancount	10-
2/30/25				10-
3/30/25				10-
4/30/25				10-
5/30/2				10-
6/30/25				10-
7/30/25				10-
8/30/2				10-
9/30/25				10-
9/4/25	Committee to Elect Josiah Morrow	24 Rutherford Ave Hoverhill, MA	Contribution	25-
9/13/2	Toni Sapienza - Domi	is 100 S. Part St HAVErhill	Signs on The Cheap Large 6x4 Sign	197.06
9/13/2	Toni Sapienza-Dona	Javer nill	Hershey Candy for Hallowern cyathering	152.97
9/13/28	Toni Sapienza-Dona	15 100 S. Parkst Haverhill	Make stickers, com Stickers for candy	181, 23

SCHEDULE B: EXPENDITURES (continued)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
10/25	Eagle Tribune Advertising	North Andwer, MA	Advertisement	12500
10/25	Haverhill Democratic Committee	Chair: Bill Cox 8 Richmond St Naver hill, ma	Candidate Breakfast	115%
* If you have itemized expenditures of \$50 Li		Line 13: Expenditures over \$50	0 (or listed above)	886,25
and under, include them in line 13. Line 14 should include only those expenditures not itemized above. Line 14: Expenditures \$50 and under (not listed above)		ly o True		
Enter on page 1, line 4 → Line 15: TOTAL EXPENDITURES IN THE PERIOD			886,25	

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

A.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions 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 ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		NA		
	emized in-kind contributions of include them in line 16. Line 17	Line 16: In-Kind Contributions ove	er \$50 (or listed above)	
should includ	t	Line 17: In-Kind Contributions \$50	and under (not listed above)	

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
				18.75
	No	jabilities this	reporting	- ==
	per.	od.		
	\mathcal{A}	3,136,89	reporting perio	
	0	ver from last	reporting peri	7.

Enter on page 1, line $7 \rightarrow$ Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

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.

Dote Dald	Name and Address of Vendor	A 6 4	Design of Francis Attends
Date Paid	(alphabetical listing required)	Amount	Purpose of Expenditure
		<u> </u>	
	1	1	
	1		
			N .
			1
Line 20. Total Itania	ad Out Of Booket Francisco Compto		
(or listed above)	ed Out-Of-Pocket Expenditures Over \$50		* If you have out-of-pocket expenses of \$50
	nized Out-Of-Pocket Expenditures \$50 and		and under, include them in line 20. Line 21 should include only those expenditures not
under (not listed abov	m2ca Out-01-1 ocket Expellulules \$30 and		itemized above.