



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: 10-16-21 Ending Date: 12-31-21

Type of Report: (Check one)

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

Joseph J. Bevilacqua
Candidate Full Name (if applicable)
Haverhill City Council
Office Sought and District
46 Lambert Ave. Haverhill
Residential Address
E-mail: _____
Phone # (optional): 978 373-4807

Committee to Elect Joe Bevilacqua
Committee Name
Toni Ann Bevilacqua
Name of Committee Treasurer
46 Lambert Ave. Haverhill
Committee Mailing Address
E-mail: _____
Phone # (optional): 978 373-4807

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1,659.68</u>
Line 2: Total receipts this period (page 3, line 11)	<u>1,000.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2,659.68</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>-0-</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2,659.68</u>
Line 6: Total in-kind contributions this period (page 6)	<u>-0-</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>11,000.00</u>
Line 8: Name of bank(s) used:	<u>Haverhill 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: Toni Ann Bevilacqua (Treasurer's signature) Date: 1-14-22

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: 1-14-22

H40 CITY CLERK JAN 14 22 AM 054

Comm. to Elect Joe Berilacqua

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
8-8-97	Joseph J. Berilacqua	46 Lambert Ave.	Campaign Loan	3,500.00
2-6-98	"	"	"	500.00
4-4-01	"	"	"	500.00
8-1-01	"	"	"	500.00
8-25-01	"	"	"	500.00
8-28-01	"	"	"	500.00
9-7-01	"	"	"	500.00
8-20-15	"	"	"	1,000.00
10-31-19	"	"	"	1,500.00
4-16-21	"	"	"	1,000.00
10-16-21	"	"	"	1,000.00
				11,000.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				12,000.00

SCHEDULE A: RECEIPTS

(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.)

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	1,000 ← 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 C: "IN-KIND" CONTRIBUTIONS

[illegible]

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