



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

HOU CITY CLRK JAN 6'22 PM 12:53

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	1/2021 Ending Date: 8/27/21
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election  year-end report dissolution
Miquel Andres Quinones	Committee to Elect Miquel Quinones
Candidate Full Name (if applicable)	Francellis Quiñones
Office Sought and District	Name of Committee Treasurer
Residential Address	Committee Mailing Address
E-mail: Miquel andres@ quinanesculture consulta  Phone # (optional): 978.332.0792	1 <b>.</b> • • • • • • • • • • • • • • • • • • •
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	$\varnothing$
Line 2: Total receipts this period (page 3, line 11)	8 = \$450
Line 3: Subtotal (line 1 plus line 2)	8.
Line 4: Total expenditures this period (page 5, line	8 = #446.89
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (pag	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	Ø
Line 8: Name of bank(s) used: Pertucket	· Bank, Haverhill
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbuttements, in-kind coffinance activity of all persons acting under the authority or on behalf of this committee in a	ontributions and liabilities for this reporting period and represents the campaignt. 22
Signed under the penalties of perjury:	(Treasurer's signature)  (Treasurer's signature)  (Treasurer's signature)
FOR CANDIDATE FILINGS ONLY Affidavit of Candillate: (check 1 box	only)
	nittee to Elect-Miquel Quinones
I certify that I have examined this report including attached schedules and it is, to the bactivity, of all persons acting under the authority or on behalf of this committee in accommendation incurred any liabilities nor made any expenditures on my behalf during this reporting process.	pest of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, 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 befinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 1/6/22

SCHEDULE A: RECEIPTS HAU CITY CLRK JAM BOZOKKI 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

report all receipts.	Please include your committee name and a pa	age number on ea	ach page.)
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/4/21	John Mitchi son 119 Kenoza St, Haverhill	#50	
8/4/21	Catherine Rogers 161 Neck Rd, Hav	\$100	
8/4/21	Janet Rose Col Primrose St. Havethill	<b>#</b> 50	
8/8/21	Nate Robertson Haveshill, MA 01830	\$25	· ·
8/17/21	Hillany Collins - Costing Brocketon St, Haverhill	<b>#50</b>	
10/11/21	Roberta. Roffo 117 Middle Rd, Haverhill	4100	
10/11/21	Francellis Quinones Howard St, Haverhill	<b>#25</b>	
10/14/21	Lindsay Sobel Boston, MA	\$ 50	
		•	P .
Line 9: Total Recei	pts over \$50 (or listed above)	2	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	6	
	RECEIPTS IN THE PERIOD	8	← 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.

1AU CITY CLRK JAN 8'22 PHI 153 RECTES

## **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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<b>A</b>		-	
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	pts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

Committee to Elect Miguel Quiñones Page 3

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

HAU CITY CLRK JAN 8'2 CARRELTED

### **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 an expent	ntures. Please include your comn	nittee name and a page number on	each page.)	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/18/21	CASH (ATM) Isis Quinones	18 Howard Street Haverhill	Campaign manager Salary	#100
9/1/21	CASH (ATM) snacks for event	18 Howard Street Haverhill	Snacks for campaign	#20
MAIZI	Eagle Tribune		Campaign advertisement	<b>‡</b> 99
8/6/21	Squarespace		campaign website	\$20
8/19/21	11			27.63
9/20/21	11			27.63
19/9/21			11	27.63
MARC				
1/5/22	Isis V. Quinones	18 Howard St Haverhill	Campaign Manager Saldry	#125
		Line 12: Total Expenditures over	er \$50 (or listed above)	3
		Line 13: Total Expenditures \$50	and under* (not listed above)	5
* If you have :		Line 14: TOTAL EXPENDITU	•	8

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Committee to Elect Miquel Quiñanes

#### SCHEDULE B: EXPENDITURES (continued) (1 PK JOH 8/22 DB) 254

Date Paid  I  I  I  I  I  I  I  I  I  I  I  I  I	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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411				
	·			
			·	
		I L	0.00 ( .11	
		Line 12: Expenditures of	over \$50 (or listed above)	
		Line 13: Expenditures \$	\$50 and under* (not listed above)	
		L		Management and the state of the

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Committee to Elect Miquel Quinones

Page 5



#### 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.

HAU CITY CLRK JAN 6'22 pm12:54 Date Received From Whom Received\* **Residential Address Description of Contribution** Value Line 15: In-Kind Contributions over \$50 (or listed above) Line 16: In-Kind Contributions \$50 & under (not listed above) Enter on page 1, line 6 → | Line 17: TOTAL IN-KIND CONTRIBUTIONS

\* 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.

Page 6

ommittee to Elect Miquel Quinones



# **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
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