

Form CPF 101 WTC: STATEMENT OF ORGANIZATION

(For Office Use Only)

CPF ID#:

Form CPF 101 WTC: STATEMENT OF ORGANIZATION ELECTED CITY, WARD, TOWN POLITICAL COMMITTEE REPORT

NAME OF CITY/TOWN: Haverhill			WARD (if applicable): City Committee	
PARTY:	Democratic		DATE OF REPORT: April 11, 2023	
			HAV CITY CLRK APR24'24 pm 2'29	
INDICATE THE	E PURPOSE OF THIS REPOR	T BY CHECKING THE API	PROPRIATE BOX BELOW:	
STATEMEN	NT OF ORGANIZATION	CHANGE OF OFFI	ICER(S)	
	fices listed. City Ward Comm		Office of Campaign and Political Finance, and file copies of this report with e this report with the Chairperson of the city committee of the political party	
One Ashbur Boston, MA (617) 979-8 ocpf@mass.	umpaign and Political Finance fron Place, Room 411 02108 300 / (800) 462-OCPF (toll fr gov / https://www.ocpf.us	ee in MA)	 Secretary of the Commonwealth, William Francis Galvin Elections Division One Ashburton Place, Room 1705 Boston, MA 02108 (617) 727-2828 / (800) 462-VOTE (toll free in MA) elections@sec.state.ma.us / https://www.sec.state.ma.us/elections City Clerk / Town Clerk or Election Commission 	
		IDENTIAL ADDRESS A	ND ZIP CODE OF THE OFFICERS OF THIS COMMITTEE: Secretary: M. Eva Rajczyk	
Chairperson:	William D. Cox, Jr.			
	8 Richmond Street		Residential Address: 48 Marshland Street	
City / State / Zip:	Haverhill	<u>MA</u> 01830	City / State / Zip: Haverhill MA 01830	
Email: BillCoxL	.aw@aol.com	Phone #: 9783732360	Email: meva.hdcc@gmail.com Phone #: 9786019549	
Treasurer*:	Paul Accardi		*A public employee may not serve as treasurer of any political committee.	
Residential Address:	2 Sarah J Circle		M.G.L. c. 55, s. 13 states that a person who is employed for compensation by the	
City / State / Zip:	Haverhill	MA 01832	Commonwealth or any county, city or town (other than an elected official) may not directly or indirectly solicit or receive political contributions. Such persons may not serve as treasurers of any political committee. If you are unsure of your status, please contact OCPF for further guidance.	
Email: paul@c	arrstaplesaccardi.c	Phone #: 9783728910		
On behalf of the a the Secretary of th municipality, the	e Commonwealth, the Directo	hereby submit this list of office or of the Office of Campaign mmittee, and, in the case of v	cers, members, and associate members of the committee with their addresses to and Political Finance, the City or Town Clerk or Election Commission of our ward committees, the Chairperson of our party's City Committee in our Date: 410 24	
understand that: I detailed accounts this office I become) I am subject to certain duties	and liabilities under M.G.L. nance activity for a period of see, I must resign and notify O	Date: 4/14/20	

LIST OTHER OFFICERS' NAMES, TITLES, RESIDENTIAL ADDRESSES AND ZIP CODES BELOW: Other Officer/Title: Joseph LeBlanc, Male VP Other Officer/Title: Rosalind McKeon, Female VP Residential Address: 18 Hawthorne Street Residential Address: 100 Water Street, Unit 328 Haverhill MA 01835 City / State / Zip: City / State / Zip: Haverhill MA 01830 Other Officer/Title: Affirmative Action Off Other Officer/Title: Residential Address: Residential Address: City / State / Zip: City / State / Zip: **MEMBERS:** Member: See Ward Committee Members Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Member: Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: ASSOCIATE MEMBERS: Associate Member: Associate Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Associate Member: Associate Member: Residential Address: Residential Address: City / State / Zip: City / State / Zip: Associate Member: Associate Member:

Residential Address:

City / State / Zip:

Residential Address:

City / State / Zip: