



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

OFFICE OF CAMPAIGN AND POLITICAL FINANCE
MASSACHUSETTS

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

7/10/25

Ending Date:

10/17/25

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Josiah Morrow

Candidate Full Name (if applicable)

School Committee At-Large

Office Sought and District

24 Rutherford Ave, Haverhill MA 01830

Residential Address

E-mail: MORROW92201@gmail.com

Phone #: 978-821-5002

Committee to Elect Josiah Morrow

Committee Name

ELIZABETH GRADY

Name of Committee Treasurer

24 RUTHERFORD AVE, HAVERHILL MA 01830

Committee Mailing Address

E-mail: Josiah for Haverhill@gmail.com

Phone #:

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

507.54

Line 2: Total receipts this period (page 3, line 12)

13,640.00

Line 3: Subtotal (line 1 plus line 2)

14,147.54

Line 4: Total expenditures this period (page 5, line 15)

6,798.62

Line 5: Ending Balance (line 3 minus line 4)

7,348.92

Line 6: Total in-kind contributions this period (page 6, line 18)

0

Line 7: Total (all) outstanding liabilities (page 7, line 19)

7,150.00

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

185.33

Line 9: Name of bank(s) used:

TD 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:

Elizabeth Grady

(Treasurer's signature)

Date:

10/26/25

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:

Josiah Morrow

(Candidate's signature)

Date:

10/26/25

SCHEDULE A: RECEIPTS

M.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 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 records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9-4-25	Rob Elaine Barker 93 Broadway, Haverhill MA 01832	\$25.00	
9-4-25	LIMA BARTOLI 25 Endora St Haverhill MA 01832	\$20.00	
9-4-25	LOUISE BEVILACQUA 84 Winona Ave, Haverhill MA 01830	\$50.00	
9-4-25	LYNDA BROWN 26 WINDSOR ST HAV, MA 01830	\$75.00	
9-4-25	JANET BRODIE 42 BELMONT AVE HAVERHILL MA 01830	\$75.00	
9-4-25	RACHEL CALLAHN PO. BOX 8200, HAV MA 01835	\$50.00	
9-4-25	CLAIRE CARLIS 39 WEST MAIN ST, NEWTON NH 03858	\$75.00	
10-5-25	EMMANUEL CHE 38 BENNINGTON ST HAVERHILL MA 01832	\$50.00	
8-24-25	BERTHA COLE 100 WATER ST, #120 HAVERHILL MA 01830	\$25.00	
9-4-25	GEAN CARCORANI 131 LAKEVIEW AVE HAVERHILL MA 01830	\$100.00	
9-4-25	WILLIAM COX, JR 8 RICHMOND ST HAVERHILL MA 01830	\$250.00	Attorney, self employed
9-4-25	JOAN CZARNICKI 14 OSGOOD ST SALEM MA 01970	\$100.00	
9-4-25	KATHLEEN DACEY 21 HIGH ST HAVERHILL MA 01832	\$50.00	

9.4.25	CTE TONE DONAIS 100 SPARK ST HAVERHILL MA 01835	\$25.00	
9.4.25	KATHY DOUGHS 121 BRACKET HILL CIR HAVERHILL MA 01830	\$25.00	
6.9.25	DAVID DUSTIN 469 DUSTIN RD. CONTOCOCK NH 03229	\$100.00	
10-15-25	RONALD DUSTIN 2805 PUFFENBERGER RD MIDDLETOWN MD 21769	\$160.00	
10-10-25	MARTHA FIORENTINI 36 MAZON AVE HAVERHILL MA 01830	\$100.00	
9-4-25	KATHY FITTS 31 EASTLAND TERR HAVERHILL MA 01830	\$100.00	
9.4.25	JOEL BAGNOM 8 REHMANO ST HAVERHILL MA 01830	\$250.00	OWNER, Architectured
9-1-25	SUZAN BOECKE 31 GARDEN ST HAVERHILL MA 01830	\$25.00	
9-4-25	STEVEN BOECKE 125 SEVEN OISLER RD. HAVERHILL MA 01830	\$25.00	
9-4-25	STEVE GORDON 1137 MAIN ST HAVERHILL MA 01830	\$50.00	
9-7-25	DEBBI GRADY 13 LAUREL HILL RD HOLLIS NH 03049	\$100.00	
9-4-25	EILEEN GRADY 55 ENDICOTT ST #2205 DANVERS MA 01923	\$500.00	RETIRED

Enter receipt totals on Page 3

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9-6-25	ELIZABETH GRADY 24 RUTHIER FLD AVE HAVERHILL MA 01830	\$1,000.00	DIRECTOR MARKETING, BETHANY COMMUNITY SVS.
9-4-25	KALISTER GREEN - BYRD 1A KENNEDY CIR HAVERHILL MA 01830	\$160.00	
9-8-25	IRENE HALEY 145 YULE ST MELROSE MA 02176	\$25.00	
9-1-25	LOUI HART 110 FAIRWOOD DR HAVERHILL MA 01835	\$50.00	
8-21-25	KAY HERLIHY 4 RIVERDAVE ERM HAVERHILL MA 01835	\$100.00	
8-31-25	ALAN JENNE 52 PERKINS CT HAVERHILL MA 01832	\$160.00	RETIRED
9-4-25	ALAN JENNE 52 PERKINS CT HAVERHILL MA 01832	\$160.00	RETIRED
8-26-25	RICHARD EARLY, JR 509 SO MAIN ST HAVERHILL MA 01835	\$150.00	
9-7-25	PAUL KEEFFE 16 JILL CIRCLE NO BEADONG MA 01864	\$25.00	
6-13-25	JOHN HOWARD KILBANE 160 WATER ST, #424 HAVERHILL MA 01830	\$300.00	RETIRED
8-26-25	JOHN HOWARD KILBANE 160 WATER ST, #424 HAVERHILL MA 01830	\$100.00	RETIRED
9.4.25	ALLAN KOPEL 107 BRICKET HILL CUL HAVERHILL MA 01830	\$25.00	
9.4.25	LINDA KOUTOULAS 358 GILE ST. HAVERHILL MA 01830	\$75.00	

Enter receipt totals on Page 3

SCHEDULE A: RECEIPTS

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Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9-5-25	LINDA LAM KOWSKI 67 MONT CLAIR RD HAVERHILL MA 01830	\$25.00	
10-14-25	JOSEPH LEBLANC 18 HAWTHORNE ST HAVERHILL MA 01835	\$50.00	
9-4-25	JASON MCKEON 9 JUNIOR WOOD AVE HAVERHILL MA 01832	\$100.00	
8-25-25	PAUL MCKEON 3 SUPERIOR DR #405 NATICK MA 01960	\$50.00	
7-6-25	ROZ MCKEON 100 WATER ST, #328 HAVERHILL MA 01830	\$500.00	RETIRED
10-8-25	ROZ MCKEON 100 WATER ST. #328 HAVERHILL MA 01830	\$500.00	RETIRED
9-4-25	ROBIN MCKEON 131 LAKEVIEW AVE HAVERHILL MA 01830	\$250.00	REALTOR, MCKEON REALTY RE
8-25-25	WILLIAM + GERTIE MCKEON 3430 GOLFSHORE BLVD, SE NAPLES, FL 3410	\$100.00	
9-4-25	STEPHEN MCKEON 4 JUNIOR WOOD RD HAVERHILL MA 01832	\$250.00	VP CUSTOMER PROGRAMS, RADISAN SYSTEMS
10-15-25	MICHAEL MOORE 5 PARTIDGE LANE EAST KINGSTON, NH 03827	\$100.00	
8-21-25	ARLENE MORAN 21 BELMONT AVE HAVERHILL MA 01835	\$25.00	
9-4-25	EDWARD MORROW 5A FRANKLIN DR HAVERHILL MA 01835	\$1,000.00	GLOBAL SALES OPERATIONS, DIO BAO LABS
8-8-25	JOSHUA MORROW 24 RUTHERFORD AVE HAVERHILL MA 01830	\$2,000.00	BUSINESS DEV, SENIOR STAFFING (CANDIDATE LOAN)

SCHEDULE A: RECEIPTS

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Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10-11-25	JOSIAH MORROW 24 RUTHERFORD AVE HAVERHILL MA 01830	\$3,000.00	BUSINESS DEV. SCHULTZ STAFFING (CANDIDATE LOAN)
9-10-25	NOMSA MCURE 67 WASHINGTON ST HAVERHILL MA 01832	\$100.00	
9-4-25	MIKE PEEZY PACY 35 JAMET RD. HAVERHILL MA 01832	\$50.00	
8-26-25	DOMINICK PALLAZIA 22 SOUTH SPRING ST HAVERHILL MA 01835	\$40.00	
9-4-25	SHARON POLLARD P.O. BOX 309 METHUEN MA 01844	\$100.00	
9-22-25	IRENE RIVARD 100 WATER ST, #304 HAVERHILL MA 01830	\$25.00	
8-18-25	RICHARD RODRIGUEZ 21 HOFMANN AVE LAWRENCE MA 01843	\$75.00	
10-17-25	JOE ROMATELLI 62 WASHINGTON ST, #11 HAVERHILL MA 01832	\$50.00	
9-4-25	JIM + KATHY RURAK 703 EAST BROADWAY HAVERHILL MA 01830	\$100.00	
9-4-25	DEANNA BUTH 10 WILDBROOK DR PLAISTOW NH 03865	\$50.00	
8-23-25	WILLIAM RUAN 16 LONGWELL ST HAVERHILL MA 01830	\$50.00	
9-4-25	CYNTHIA FRANZONE RUAN 10 FRANZONE DR HAVERHILL MA 01835	\$50.00	
6-13-25	JEAN SANDERLS 154 MURRAY DR HAVERHILL MA 01832	\$100.00	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9.4.25	MELISSA SLAVEY 179 ORCHARD HILL RD HAVERHILL MA 01835	\$ 100.00	
9.4.25	MARILYN SHAHIAN 21 SALEM ST HAVERHILL MA 01835	\$ 25.00	
9.4.25	AL TIMM 3 HADD DRIVE ANDOVER MA 01810	\$ 50.00	
9.9.25	MARGARET TOOMEY 181 BRICKETT HILL CIR HAVERHILL MA 01830	\$ 150.00	
9.4.25	JULIA DEVEAUX 98 WATER ST, # 402 HAVERHILL MA 01830	\$ 25.00	
9.4.25	GWEN WALLENS 952 LOWELL RD GRAND MA 01450	\$ 25.00	
Line 10: Total Receipts over \$50 (or listed above)		13,640	* If you have itemized receipts of \$50 and under, attach them on line 10. Line 11 should include only those receipts not itemized above. ← Enter on page 1, line 2
Line 11: Total Receipts \$50 and under (not listed above)			
Line 12: TOTAL RECEIPTS IN THE PERIOD		13,640	

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
9.25.25 9.9.25	CANVA	3212 EAST 15th Bld 1 CAESAR CHAVEZ AUSTIN TX 78702	POSTCARDS	58.00
10.6.25	CANVA	3212 E CAESAR CHAVEZ ST 1300 BLD 1 AUSTIN TX 78702	POSTCARDS	185.50
9.9.25	CANVA	3212 E CAESAR CHAVEZ ST 1300, BLD 1 AUSTIN TX 78702	POSTCARDS + DOOR HANGERS	235.00
10.7.25	La Plume + Sons PRINTING	1 FARLEY ST LAWRENCE MA 01843	LAWN SIGNS	1381.26
10.16.25	La Plume + Sons Printing	1 FARLEY ST LAWRENCE MA 01843	POSTAGE FOR MAKING	3698.80
8.20.25	The ROMA RESTAURANT	29 MIDDLESEX ST HAVERHILL MA 01835	EVENT DEPOSIT	100.00
9.2.25	The ROMA RESTAURANT	29 MIDDLESEX ST HAVERHILL MA 01835	CAMPAIGN KICK OFF EVENT	531.81
10.7.25	US POSTAL SERVICE	2 WASHINGTON ST HAVERHILL MA 01830	STAMPS	93.60
10.2.25	WHAV	30 HOWE ST HAVERHILL MA 01830	RADIO + WEBSITE ADVERTISING	350.00

SCHEDULE B: EXPENDITURES (continued)[illegible]

** If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.*

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)

6,633.76

Line 14: Expenditures \$50 and under (not listed above)

164.66

Line 15: TOTAL EXPENDITURES IN THE PERIOD

6, 798, 62

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.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 records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

[illegible]

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
7.10.25	JOSIAH MORROW	24 BUTTERFORD AV HAVERHILL MA 01830	LIABILITY TRANSFERRED FROM DCPF COMMITTEE	2,150.00
8.8.25	"	"	CANDIDATE LOAN	2,000.00
10.11.25	"	"	CANDIDATE LOAN	3,000.00
Enter on page 1, line 7 → Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)				7,150.00

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.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
9.23.25	FACE BOOK J HALKELL WAY MENLO PARK CA 94025	10.33	FB APPS
9.19.25	VFW SANTA BARBARA P.O. BOX 5345 HAVERHILL MA 01835	175.00	EVENTS SPONSORSHIP
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)		185.33	* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above. ← Enter on page 1, line 8
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)		—	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		185.33	

*Schedule E is not for ballot question committee use.

Transition-Out Report 1/1/2025 - 7/10/2025

 Export to PDF

981057

Summary Liabilities [1]

Filer: Josiah Morrow (17906)

Office Sought: City Councilor Haverhill

Filed On: 7/10/2025

Reporting Period: 1/1/2025 - 7/10/2025

Candidate Residential Address: 134 Brickett Hill Circle Haverhill,
MA 01830

Committee Name: Morrow Committee

Treasurer Name: Elizabeth Morrow

Committee Address: 134 Brickett Hill Circle Haverhill,
MA 01830

Bank Name: Santander

Beginning Balance:	\$777.54
Total Receipts this period:	\$0.00
Total Expenditures this period:	\$270.00
Ending Balance:	\$507.54
Total Inkind Contributions:	\$0.00