

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance (2017 22.00 at 1.5720 per 1.65

		h	\		(TU)	File	with: City or	Town Cler	k or Elec	tion Commission
Fill in Re	porting Period dates:	Beginning Date:	ñ 27,	2023		Ending Date	: Jul 5	, 2023		
L										
Type of I	Report: (Check one)	•								
8th day	preceding preliminary	8th day preceding election	D	30 day	after e	lection [] year-en	d report	☐ di	ssolution
<u> </u>										· · · · · · · · · · · · · · · · · · ·
		•		Vec for	Concon	tino (Haverh	ill for Cons	ontino\		
·	Candidate Full Name (if a	pplicable)	-	103 101	COHSCH		ommittee Na			
	•	,	İ	Heidi Bi	anchet	_		/		
	Office Sought and Di	strict				Name o	f Committee	Treasurer		
				18 Fain	/lew Fa	rm Rd, Haver	hill, MA 01	832		,
	Residential Addre	SS				Comm	ittee Mailing	Address		
E-mail;			_	E-mail:		yesfo	rconsentin	o@gmail	com	
Phone # (opti	onal):			Phone # (optional):	;	(781) 901-00	29	
[SUMMARY BALAN	NCF	INFO	RMA	TION:	 .			7
	•								-	
	Line 1: Ending Balanc	e from previous report			•			6,984.9	92	
	** • m . 1	11 11/ 64							\exists	
	Line 2: Total receipts t	his period (page 3, line)	11)		<u>L</u>				의	
	Line 3: Subtotal (line 1	nluc line 2)						5.094.6	2	
	Enite 3. Subtotal (line i	pius mie 2)			<u> </u>		·	6,984.9		
	Line 4: Total expenditu	ares this period (page 5.	line	14)			,	5,888.	58	
				,	<u> </u>					
	Line 5: Ending Balance	e (line 3 minus line 4)						1,096.3	34	
				·	<u> </u>				=	
	Line 6: Total in-kind c	ontributions this period	(pag	e 6)					0	
	T \$100 0 Trade 1 (-11)	4 41 11-1 111/1	~ `			 -			_	
	Line 7: Total (all) outs	tanding habilities (page	1)		<u></u>				0]	
	Line 8: Name of bank(s) used: Haverhill Bank				· · · · · · · · · · · · · · · · · · ·				
1										
	Committee Treasurer:									
I certify that I activity, inclu-	have examined this report including at ding all contributions, loans, receipts, e	tached schedules and it is, to the l expenditures, disbursements, in-ki	best o	f my knowl	edge and	belief, a true and	i complete st	atement of	all campa	rign finance
finance activit	y of all persons acting under the author	rity or on behalf of this committee	in ac	cordance w	ith the re	quirements of M	I.G.L. c. 55.	-		
Signed under	the penalties of perjury:				·· · · · · · · · · · · · · · · · · · ·	(Treasurer's sign	ature)	Date:	7/5	23
FOR CAN	DIDATE FILINGS ONLY:	Affidavit of Candidate: (check 1	hov	only)						
			DOM	J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				:		
	te with Committee hat I have examined this report includi	ng attached schedules and it is, to	the b	est of my k	nowledge	and belief, a tru	e and comple	ete statemer	nt of all c	ampaien finance
activity, o	of all persons acting under the authority	or on behalf of this committee in	acco	rdance with	the requ	irements of M.G	.L. c. 55. 1 h	ave not rec	eived any	contributions,
İ	any liabilities nor made any expenditur	es on my benait during this repor	ung p	eriod that a	re not oth	erwise disclosed	in this repor	1.		
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 a	ctivity, including contributions, loans, r	receipts, expenditures, disburseme	ents, i	n-kind cont	ributions	and liabilities for	r this reporti	ng period a	nd repres	ents the
campaign	i finance activity of all persons acting u	inger the authority or on behalf of	this o	andidate ir	accorda	ice with the requ	irements of	_	5.	
Signed under	the penalties of perjury:			,		(Candidate's sign	nature)	Date: _		
l						-				

SCHEDULE A: RECEIPTS

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 a page number on each page.)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer		
Date Received	(aiphabeucai usung required)	Amount	(for contributions of \$200 or more)		
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			<u> </u>		
		1			
<u> </u>					
	/				
1					
Line 9: Total Receip	ots over \$50 (or listed above)				
Line 10: Total Recei	pts \$50 and under* (not listed above)				
ine 11: TOTAL R	ECEIPTS IN THE PERIOD	0	F-4		
mo in tolini		<u>L</u> _	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			Leavening of the second contraction of the s
		<u>/</u>	
ne 9: Total Receip	ots over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ne 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← 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 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 all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid						
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
Jun 30, 2023	Haverhill Bank	180 Merrimack St, Haverhill, MA 01830	Bank Fee	10		
Jun 3, 2023	Shawmut Strategies Group, LLC	11 Beacon St, Ste 1125, Boston, MA 02108	Digital Advertising	5,000		
Jun 13, 2023	Tele-Town Hall Services	PO Box 735080, Chicago, IL 60673	SMS Campaign	840.99		
		Line 12: Total Expenditures ov	er \$50 (or listed above)	5,850.99		
Line 13: Total Expenditures \$50 and under* (not listed above)				37.59		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 5,888.58						

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Do4+ D-23	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Expenditures over \$50	(or listed above)	
	<u> </u>	12. 2perioration 0 101 #30	(0. 1000 0000)	
		Line 13: Expenditures \$50 and u	ınder* (not listed above)	
	T	T.L. 14. DODAY TYPE	IIDDO EX MITTO SERVER	
		Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
				·
		1		
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	0

^{*} 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.

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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
	·			
		·		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	0