



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

RECEIVED
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METHUEN, MA

2019 SEP -9 AM 10 21
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2019 Ending Date: 8/30/19

Type of Report: (Check one)

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

<u>Joel Philip Faretra</u>	
Candidate Full Name (if applicable)	
<u>City Council Central District</u>	
Office Sought and District	
<u>6 Clason Ct, Methuen, MA</u>	
Residential Address	
E-mail: <u>jfaretra67@gmail.com</u>	
Phone # (optional): <u>(978) 441-9441</u>	

<u>CTE Joel Faretra</u>	
Committee Name	
<u>Virginia Ruffini</u>	
Name of Committee Treasurer	
<u>14 Don Avenue, Methuen, MA 01844</u>	
Committee Mailing Address	
E-mail: <u>vruffini@aol.com</u>	
Phone # (optional): <u>(978) 557-5763</u>	

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

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Line 2: Total receipts this period (page 3, line 11)

\$1,230

Line 3: Subtotal (line 1 plus line 2)

\$1,230

Line 4: Total expenditures this period (page 5, line 14)

\$339.08

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

\$890.92

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

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Line 7: Total (all) outstanding liabilities (page 7)

\$190.00

Line 8: Name of bank(s) used: Santander

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: Virginia Ruffini (Treasurer's signature)

Date: 9/8/19

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: 9/8/2019

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/29/19	Angelo, Steve 20 Washington St #26 Methuen, MA 01844	\$50.00	
8/29/19	Casey, Jennifer 191 Bothernut Lane Methuen, MA 01844	\$100.00	
8/29/19	Cummings, John 2 Fenwick Circle Methuen, MA 01844	\$50.00	
8/29/19	CTE Steve Seba 15 Chippy Lane Methuen, MA 01844	\$50.00	
8/29/19	Deeb, Dennis J II 58 Conrad St Methuen, MA 01844	\$25.00	
8/29/19	DiTrapano, Elisa 16 Arnold St Methuen, MA 01844	\$50.00	
8/29/19	DiZoglio, Nicholas 31 Lisa Lane Methuen, MA 01844	\$25.00	
8/29/19	DiZoglio, Ryan 80 Swan Ave Methuen, MA 01844	\$20.00	
8/17/19	Faretra, Maureen 14 Angela Circle Methuen, MA 02174	\$120.00	
8/29/19	Forsyth, Wendy 6 Arrowwood St Methuen, MA 01844	\$50.00	
8/29/19	Friends of Jennifer Kamen 10B Grandview Road Methuen, MA 01844	\$100.00	
8/29/19	Kalivas, Angela 14 Bumpy Lane Methuen, MA 01844	\$50.00	

Line 9: Total Receipts over \$50 (or listed above)

\$1,230

Line 10: Total Receipts \$50 and under* (not listed above)

← 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)
8/12/19	Koziell, Natalie 14 Don Avenue Methuen, MA 01844	\$50.00	
8/18/19	Koziell, Peter 14 Don Avenue Methuen, MA 01844	\$20.00	
8/29/19	McDonnell, Michael 1 Treerunk Lane Methuen, MA 01844	\$100.00	
8/29/19	Pinto, Julie 80 Clayton Avenue Methuen, MA 01844	\$60.00	
8/8/19	Ruffini, Virginia 1 Arrowwood ST Methuen, MA 01844	\$30.00	
8/23/19	Ruffini, Michael 1 Arrowwood ST Methuen, MA 01844	\$75.00	
8/13/19	Santos, Sandra 2 Locust Park Everett, MA 02149	\$25.00	
8/29/19	Schena, Christian 10 Heartwood ST Methuen, MA 01844	\$20.00	
8/29/19	Scott, Michael 14 Arrowwood ST Methuen, MA 01844	\$75.00	
8/17/19	Shibilia, Daniel 196 Lowell Street Methuen, MA 01844	\$25.00	
8/29/19	Smith, Brian 14 Tower Street Methuen, MA 01844	\$50.00	
8/17/19	Zangri, Sharyn 4a Eastbrook Place Methuen, MA 01844	\$50.00	
Line 9: Total Receipts over \$50 (or listed above)		\$1,230	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1,230	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/29/19	Bada Bing	302 Broadway ST West Haven, CT 06491	Campaign kick off event	\$62.80
8/12/19	Stripe Inc	3180 18th Street San Francisco, CA 94110	Processing fee for online donation	\$1.75
8/13/19	Stripe Inc	3180 18th Street San Francisco, CA 94110	Processing fee for online donation	\$1.63
8/17/19	Stripe Inc	3180 18th Street San Francisco, CA 94110	Processing fee for online donation	\$1.75
8/29/19	Stripe Inc	3180 18th Street San Francisco, CA 94110	Processing fee for online donation	\$1.75
8/19/19	Unitech Print	101 Dupont ST Plainview, NY 11803	Copies of Campaign flyers	\$80.00
8/28/19	Yardsignwholesale	1100 W Colonial Dr Orlando, FL 32804	Campaign Yard signs	\$190.00

Line 12: Total Expenditures over \$50 (or listed above)

\$339.08

Line 13: Total Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

\$339.08

* 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 B: EXPENDITURES (continued)

Line 12: Expenditures over \$50 (or listed above)

\$339.08

Line 13: Expenditures \$50 and under* (not listed above)

~~\$ 339.08~~

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES 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.

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

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.

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

\$190.00