



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 1/1/2021

Ending Date: 10-15-2021

Type of Report: (Check one)

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

Joel Philip Faretra
Candidate Full Name (if applicable)
City Council Central District
Office Sought and District
6 Closson St, Methuen, MA
Residential Address
E-mail: <u>jfaretra67@gmail.com</u>
Phone # (optional): <u>(978) 771-9441</u>

CTE Joel Faretra
Committee Name
Virginia Ruffini
Name of Committee Treasurer
14 Don Avenue, Methuen, MA
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

\$87.50

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

\$3,845.00

Line 3: Subtotal (line 1 plus line 2)

\$3,932.50

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

\$447.17

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

\$3,485.39

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

\$149.82

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

/

Line 8: Name of bank(s) used: Santander / Salem Co-operative Bank
Closed 1/14/21

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: 10/22/21

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:

J. Philip Faretra

(Candidate's signature)

Date: 10/24/21

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)
9/28/21	Angelo, Steve 20 Washington ST #26 Methuen, MA 01844	\$25.00	
3/8/21 9/28/21	Barry, Kevin 17 Houston Ave Methuen, MA 01844	\$100 \$100 \$200	Methuen Fire Department Firefighter
9/28/21	Beauregard, David 118 Second St Apt 1 North Andover, MA 01845	\$50.00	
1/14/21	Beauregard Jr, David 10 Fenwick Circle Methuen, MA 01844	\$50.00	
9/28/21	Belanger, Pamela 44 Shirley Avenue Methuen, MA 01844	\$50.00	
9/28/21	Burgess, James 17 Crestshire Lane Methuen, MA 01844	\$50.00	
4/9/21	Committee to elect Diane DiZoglio 24 Smith Ave Methuen, MA 01844	\$100.00	
9/28/21	Committee to elect James McCarthy 3 Hyder Ave Methuen, MA 01844	\$100.00	
9/28/21	Committee to elect Mike Simard 18 Arrowwood St Methuen, MA 01844	\$100.00	
2/26/21	Committee to elect Steve Sabo 15 Cherry Lane Methuen, MA 01844	\$100.00	
9/28/21	Cummings, John 2 Fenwick Circle Methuen, MA 01844	\$50.00	
2/26/21	Curran, Edward 19 Reservoir ST Methuen, MA 01844	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$3,845.00	← 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)
9/28/21	Trulli-Harwes, Janis	\$50.00	
9/29/21	17 Heritage Lane Methuen, MA 01844		
Vargas, Nicholas	26 Rock N Pines Rd Freemont, NH 03044-3422	\$200.00	Chef Bada Bing Pizza Methuen, MA

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

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

\$3,845.00

← 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.)

Enter on page 1, line 4 →

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

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

Line 14: TOTAL EXPENDITURES IN THE PERIOD

\$447.17

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

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.

* 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**

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

← Enter on page 1, line 7

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.

SCHEDULE D: LIABILITIES