



Commonwealth
of Massachusetts

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Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

2023 NOV -3 AM 10: 19

Fill in Reporting Period dates:

Beginning Date:

11/1/23

File with: City or Town Clerk or Election Commission

Ending Date:

10/31/23

Type of Report: (Check one)

8th day preceding preliminary

8th day preceding election

30 day after election

year-end report

dissolution

William S Haneffant II

Candidate Full Name (if applicable)

East District City Council

Office Sought and District

6 West Ayer St Methuen, MA 01844

Residential Address

E-mail:

billhaneffantformmethuen@gmail.com

Phone # (optional):

CTE Bill Haneffant

Committee Name

Theresa Haneffant

Name of Committee Treasurer

6 West Ayer St Methuen, MA 01844

Committee Mailing Address

E-mail:

Billhaneffantformmethuen@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

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

2895.00

Line 3: Subtotal (line 1 plus line 2)

2895.00

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

2298.35

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

596.65

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

2000.00

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

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 financial activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign financial 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.

(Treasurer's signature)

Date: 11/1/2023

Signed under the penalties of perjury: Theresa A Haneffant

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 financial 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 financial activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign financial 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:

John J. Haneffant

(Candidate's signature)

Date: 11/1/2023

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)
8/2/2023	Michael & Diane Alaimo 14 Old Farm Rd Methuen, MA 01844	125.00	
7/27/2023	Dolores & Kendra Augusta 24 Varnum Ave Methuen, MA 01844	50.00	
8/2/2023	Richard Aziz 37 Dexter St Methuen, MA 01844	50.00	
8/2/2023	CTE David Beauregard 10 Fenwick Cir Methuen, MA 01844	100.00	
8/4/2023	Ronald Bertheim 16 Lenox Ave Methuen, MA 01844	50.00	
10/24/2023	Patrick Bower 17A Central St Methuen, MA 01844	200.00	Director of DPW
8/2/2023	Eileen Everett 10 West Ayer St Methuen, MA 01844	200.00	Retired
10/24/2023	Eileen Everett 10 West Ayer St Methuen, MA 01844	100.00	
7/26/2023	Larry & Eileen Giordano 76 Bonanno Ct Methuen, MA 01844	100.00	
10/24/2023	Caitlyn Haneffant 6 West Ayer St Methuen, MA 01844	100.00	
7/18/2023	Sidney & Carolyn Harris 2 Apple Blossom Way Methuen, MA 01844	100.00	
8/2/2023	Jennifer Kannan 10B Grandview Rd 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

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/2/2023	Bob & Linda Kelley 151 Washington St Methuen, MA 01844	150.00	
8/2/2023	Matthew Kraunelis 61 Cox Ln Methuen, MA 01844	50.00	
8/2/2023	William & Elizabeth Manzi 19 Heritage Ln Methuen, MA 01844	100.00	
10/24/2023	Scott McNamara 4 Oakhill Dr Methuen, MA 01844	200.00	City of Methuen Chief of Police
8/2/2023	Edward & Kimberly Quinn 47 Olympic Vilg. Dr. Methuen, MA	100.00	
7/28/2023	Jphn & Maureen Saba 479 Prospect St Methuen, MA 01844	100.00	
10/24/2023	Steve & Cathy Saba 15 Chippy Ln Methuen, MA 01844	100.00	
8/2/2023	CTE Steven Saba 15 Chippy Ln Methuen, MA 01844	100.00	
8/2/2023	Michael Simard 18 Arrowwod St Methuen, MA 01844	100.00	
8/2/2023	Steve & Amy Vallant 6 Derry Rd Methuen, MA 01844	50.00	
Line 9: Total Receipts over \$50 (or listed above)		2325.00	
Line 10: Total Receipts \$50 and under* (not listed above)		570.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD			← 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

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

Line 14: TOTAL EXPENDITURES IN THE PERIOD

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

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 B: EXPENDITURES (continued)

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

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

Line 14: TOTAL EXPENDITURES IN THE PERIOD

Enter on page 1, line 4 →

* 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.

Enter on page 1, line 6 →

Line 15: In-Kind Contributions over \$50 (or listed above)

Line 16: In-Kind Contributions \$50 & under (not listed above)

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

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)