

Signed under the penalties of perjury:

# Form CPF M 102: Campaign Finance Report Municipal Form RECEIVE

Office of Campaign and Political Finance

RECEIVED CITY CLERK'S OFFICE NEWBURYPORT, MA

of Massachusetts	File with Git of Town Clerkor Election Commission
Fill in Reporting Period dates: Beginning Date:	1/23 Ending Date: 10/30/23
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election	
Jennie Donatue Candidate Full Name (if applicable) City Councillor Ward 2 Office Sought and District 18 Cherry St Newbryport 01950 Residential Address E-mail: jennie donatue 78@ gmail.com Phone # (optional):	Jennie Donahue 2021  Committee Name  Molly Man vel  Name of Committee Treasurer  18 Chary St. Newborgout 0/950  Committee Mailing Address  E-mail: jenniedorahue 76@ gmail.com  Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	502.50
Line 2: Total receipts this period (page 3, line 11)	5776.19
Line 3: Subtotal (line 1 plus line 2)	6278.69
Line 4: Total expenditures this period (page 5, lin	e 14) 5720.52
Line 5: Ending Balance (line 3 minus line 4)	556.17
Line 6: Total in-kind contributions this period (pa	ige 6) 25.78
Line 7: Total (all) outstanding liabilities (page 7)	Ø
Line 8: Name of bank(s) used: Institution	for Javings
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox only)
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in actincurred any liabilities nor made any expenditures on my behalf during this reporting	be best of my knowledge and belief, a true and complete statement of all campaign finance ecordance with the requirements of M.G.L. c. 55. I have not received any contributions, g 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 finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	s, in-kind contributions and liabilities for this reporting period and represents the

(Candidate's signature)

### **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.)

D	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	*		
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
. 11 momut 1	ECEIPTO IN THE BEDIOD	5776.19	1, 1, 2
me II: TOTAL R	ECEIPTS IN THE PERIOD	3176.11	← Enter on page 1, line 2

<sup>\*</sup> 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)
	(		
Line O. Tetal D	to oxion \$50 (on listed above)		
w	ts over \$50 (or listed above)		
	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD	5776.19	Enter on page 1, line 2

<sup>\*</sup> 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 expend	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							
6/1/23	DBA Image Brand Media	21 N Atwisson st Newburgport 01950	graphic design	100							
9/21/23	Market Bashet	25 Storey Ave Newbury port 01950	food for meet + greet	51.19							
8/16/23	Minuteman Press	188 Newborgport TPUR Newborgport 01950	Street list	18.10							
8   29   23	Minuteman Press	II II	Street list	11.09							
9   28   23	Minuteman Press	ı( ıt	Business Cards	79.69							
10/24/23	Minuteman Press	43	moiler	734.82							
8   4   23	Mission Oak	26 Green St Newburyport 01950	launch party	1641							
9/14/23	OTC Brands	PO BOX 2306 Omaha, NE 68103	meet + greet	62.87							
4/26/23	ThriftCo Printing	56 Polarici St Pearbody, MA 01960	mailer	372.08							
4/28/23	Thrift Co Printing	ii ii	business cards	69.00							
9  8   23	Thrift to Printing	II 0	lawn signs + door hangers	1031.26							
4/11/23-	Act Blue	366 Summer St Sumerville 19 02144	fees	68.81							
		Line 12: Total Expenditures ov	er \$50 (or listed above)	572.52							
		Line 13: Total Expenditures \$50	and under* (not listed above)								
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	5720.52							

<sup>\*</sup> 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 4

## SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
5   8   23	Amazon	Seattle, WIT 98109	Acrylic table top sign holders	22.72
9/20/23	Amazon	410 Terry Ave N Seattle WA 98109	meet + greet	20.84
9/20/23	Amazon	410 Terry Ave N Seattle WA 98109	meet tyreet	31.99
4/21/23	Jennie Donahue	18 Cherry St Newburyport	canolidate return	500
5 /8 /23	Jennie Brahve	n n	Canddote refurn	450
8/18/23	Elite Printing Group	Ro Boy 276 Stratham, NHO3865	yard signs	455
		·		
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and to	under* (not listed above)	
* 10	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	5720.52

<sup>\*</sup> 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				
The second secon								
		Line 15: In-Kind Contributions	s over \$50 (or listed above)					
	Line 16: In-Kind Contributions \$50 & under (not listed above) 25.7							
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C		25.78				

<sup>\*</sup> 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
	*			
		Line 18: TOTAL OUTSTAN	DING LIADY PRIEGONALL	Ø

2023-08-10 18:1 Ellen V	_	еn		2023-10-24 Andrew S				00000		2023-04-15 5:26 Jared H		rine		2023-07-22 15:3 Ric F	2023-04-11 21:4 Sara E	2023-07-19 12:5 Barry (	ica	2023-08-18 16:0 Bopha E		2023-07-15 9:25 Bopha E			Paid At Donor First Nam Donor Last Nam Donor Address L Donor City
Waters	Trowbridge	Stark	SMITH	Simpson	Simpson	Shand	Russo	Majahad	Jackson	Hubbard	Hall	Gendron	Garibaldi	Fleisher	Eskrich	Connell	Carleo	Boutselis	Boutselis	Boutselis	Boateng	Belts	Donor Last Nam
30 Milk St	251 High Street, Newburyport	86 High St., 3	175 Storey Ave,	1 1/2 Greenleaf : Newburyport	1 1/2 Greenleaf: Newburyport	18 Boardman St Newburyport	22 Bromfield St. Newburyport	6, 59th Street	49 Scotland rd Newbury	49 Boardman St Newburyport	46 Low St	8 Brooks Court	2-Chamberlain & Winthrop	418 Euille Street Alexandria	8850 Blackhawk Middleton	36 Woodland Str Newburyport	109, Prospect S Newburyport	155 6th Street	155 6th St.	155 6th Street	18 Merrill St	14 67th St	n Donor Address
Newburyport	Newburyport	Newburyport	175 Storey Ave, NEWBURYPOR MA	Newburyport	Newburyport	Newburyport	Newburyport	Newburyport	Newbury	Newburyport	Newbury	8 Brooks Court NEWBURYPOR MA	Winthrop	t Alexandria	Middleton	Newburyport	Newburyport	Lowell	Lowell	Lowell	Newburyport	Newburyport	L Donor City
MA	MA	MA	R MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	VA	M	MA	MA	MA	MA	MA	MA	MA	Donor State
1950	1950	1950	01950-6227	1950	1950	1950	1950	1950	1951	1950	91951	1950	2152	22314	53562	1950	1950	1850	1850	1850	1950	1950	Donor ZIP Amount
25 Not Employed Not Employed	50 Marketing	15 Not Employed Not Employed	150 Safety Inspector US Government	50	50	25 State Represer	100 estimator	50 Material Inspec	50 Not Employed Not Employed	50 VP, Operations ε Scytales	250 Real Estate	50 Not Employed	100 Podiatrist	50 Entrepreneur	150 Project Assistar	700000	100 Marketing VP	100 Teacher	100 Not Employed	100 Teacher	50 Social Worker	25 Not Employed	Donor Occupat
Not Employed	Self	Not Employed	r US Government			25 State Represent MA House of Representatives	LD Russo, Inc.	50 Material Inspect Rochester Electronics	Not Employed	ε Scytales	Hall and Moskow	Not Employed	Foot & Ankle Associates	Merlin Mobility	150 Project Assistani University of Wisconsin Population Health Institut	Not Employed	New Balance	Lowell Public Schools	Not Employed	Lowell Public Schools	Newburyport Youth Services	Not Employed	Donor Occupatic Donor Employer

Date Received	First Name	Last Name	Address	Amount	Occupation (over \$200)
8/28/23	Paul/Susan	Acquaviva	62 Bromfield St Newburyport	50	
4/26/23	Ann	Blinkhorn	20 Spoonbill Dr. Beaufort, SC 29907	250	Retired
9/1/23	Ann	Blinkhorn	20 Spoonbill Dr. Beaufort, SC 29907	500	Retired
7/19/23	Ed	Cameron	17 Hancock St. Newburyport	50	
7/19/23	Ed/Suzanne	Cameron	17 Hancock St. Newburyport	25	
5/15/23	Monica	Corcoran	18 Market Sq #4 Newburyport	30	
4/24/23	Jennie	Donahue	18 Cherry St. Newburyport	450	Candidate
7/19/23	Wade	Donaldson		50	
8/28/23	Kristen	Farrell	28 Spofford St Newburyport	100	
4/21/23	Frank	Fleisher	3c Zabriskie Dr. Newburyport	500	Retired
7/19/23	John/Linda	Fowler/Jackson	49 Scotland Rd. Newbury MA 01951	100	
9/21/23	Frank	Gately Jr	2 Bromfield Ct Newburyport	100	
	Katherine/Greg				
7/19/23	5.0	Gendron	8 Brooks Court Newburyport	50	
7/19/23	0	Gingras	10 Independent St. Unit A Newburyport	50	
7/19/23		Holaday	6 Parsons St. Newburyport	50	
9/21/23		Hurzeler	252 High St Newburyport	100	
	John/Karen	Lowell	122 Glen St. apt 1 Rowley, MA 01969	50	
7/19/23		Menin	148 High St Apt. 2 Newburyport	100	
9/29/23	Julie	Menin	83 Lime St Newburyport	200	Retired
7/19/23	Nicholas	Metcalf	P.O. Box 758 Newburyport	100	
7/19/23	Doth	Dless	88 Stevens Pond Rd. Liberty Maine	77272	
9/1/23		Place	04949	100	
7/19/23		Place	88 Steven Pond Rd, Liberty, ME 04949	50	
1/19/23	Judith	Robinson	346 Woodstock St. Seabrook NH 03874	100	
10/5/23	Michael	Sandberg	10 Arthur Welch Dr. Newburyport, MA 01950	100	
7/19/23	Andrew	Simpson	1 1/2 Greenleaf St. Newburyport	50	
7/19/23	Mike	Sylvester	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	50	
7/19/23	Dillon	Thompson	25 Temple St. Apt. 510 Newburyport	10	
7/19/23	Charles	Tontar	29 Jefferson St. Newburyport	100	
7/19/23	Bruce	Vogel	59 Bromfield Ct Newburyport	150	
5/1/23	Ellen/Michael	Waters	30 Milk St Newburyport	25	
	Mass Nurses		**************************************		
	Assoc PAC		340 Turnpike St, Canton, MA 02021	100	
	Robert/Susan		24 Cherry St, Newburyport	50	
10/19/23		Menin	148 High St Apt. 2 Newburyport	50	
		Acquaviva	62 Bromfield St Newburyport	100	
	Katherine/Greg	Condror	9 Procks Court Name	Si primi	
10/23/23	•		8 Brooks Court Newburyport	100	
10/16/23 10/23/23			41 Green St, Newburport	25	
10/23/23	Den	Szabo		40	