



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2011 MAR 29 PM 5:12

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

MILFORD, MASS.

Fill in dates: Reporting Period Beginning 1-3-2011 Ending 3-28-2011

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

William D. Buckley
Full Name of Candidate (if applicable)
Milford Board of Selectman
Office Sought and District
32 Iadarola Ave Milford MA 01757
Residential Address
Tel. No. (optional)

Committee to Elect Bill Buckley Selectman
Committee Name
Jyll M. Buckley
Name of Committee Treasurer
32 Iadarola Ave Milford MA 01757
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ 0
Line 2: Total receipts this period (page 2, line 11)	\$ 8560.89
Line 3: Subtotal (line 1 plus line 2)	\$ 8560.89
Line 4: Total expenditures this period (page 3, line 14)	\$ 5833.77
Line 5: Ending balance (line 3 minus line 4)	\$ 2727.12
Line 6: Total in-kind contributions this period (page 4)	\$ 0
Line 7: Total (all) outstanding liabilities (page 4)	\$ 2442.89
Line 8: Name of bank(s) used	Milford Federal Savings 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 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: Jyll M Buckley Date 3-29-11
Treasurer's signature (in ink)

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)
 Candidate with Committee and no activity independent of the 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.
 Candidate without Committee OR Candidate with independent activity filing separate report
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 committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: William D Buckley Date 3-29-11
Candidate signature (in ink)

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.

This page may be copied 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)
3-11-11	113 Highland St Milford Ma 01757 Berardi Pasquale & Barbara	100	00	
3-5-11	Buckley David & Rose 11 Susans Way Franklin Ma 02038	100	00	Sr Business Analyst Hanover Insurance
3-11-11	Buckley David & Rose 11 Susans Way Franklin Ma 02038	100	00	Quality Mgr. Ximedica Corp.
2-9-11 2-14-11 3-24-11	Buckley William (loan) 32 Tadarla Ave Milford, Ma 01757	2,442	89	
3-5-11	Correia Alberto 3 Lean Lane Milford, Ma 01757	50	00	
3-5-11	Costanza, Eugene 6 Ryan Rd Milford Ma 01757	100	00	
3-5-11	Delfanti Thomas & Susan 8 South Terrace Milford Ma 01757	100	00	
3-12-11	DelVecchio Lawrence & Regina 7 Memory Ln. Milford Ma 01757	100	00	
3-11-11	Falvey David & Esther 15 Claridge Circle Milford, Ma 01757	60	00	
3-5-11	Flomere Brian & Janet 25 Corp Rd Milford Ma 01757	50	00	
3-21-11	Le Blanc Frances R 14 Cornell Dr Milford, Ma 01757	100	00	
3-11-11	Lindquist Arthur & Sheila 6 Wildwood Dr Milford Ma 01757	100	00	
2-29-11	Lindquist Arthur & Sheila 6 Wildwood Dr Milford, Ma 01757	50	00	
3-5-11	Moro Mary 7 Conniff Ave Milford, Ma 01757	50	00	
3-24-11	Pognmi Ronald 208 Main St Suite 118 Milford Ma 01757	100	00	
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
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.

Committee to
Elect Bill Buckley

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

RECEIVED
2011 MAR 29 PM 5:12
MILFORD, MASS

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
3-11-11	Panorese Richard & Patricia 38 S Centrd S Milford Ma 01757	100	00	
3-11-11	Parretti Michael & Holly 1 Eben St Milford Ma 01757	100	00	
3-11-11	Pavia Robert & Teed Melanie 3 North St Milford Ma 01757	50	00	
3-5-11	Sayles Michael & Ruth 12 Shud Rd Hopedale Ma 01747	200	00	Developer Self-employed
3-11-11	Scialdone Domenic & Sandra 37 Taft St Milford Ma 01757	100	00	
3-5-11	Spino Timothy & Cynthia 15 Wales St Milford Ma 01757	50	00	
3-5-11	Timm Michael 38 Field Pond Rd Milford Ma 01757	100	00	
3-2-11	Veilleux Peter 2 Cornell Dr Milford Ma 01757	50	00	
3-2-11	Villani, Mary 29 Tadarola Ave Milford Ma 01757	50	00	
Line 9: Total receipts in excess of \$50 (or listed above)	4402	89		
Line 10: Total receipts \$50 and under* (not listed above)	4158	00		
Line 11: TOTAL RECEIPTS IN THE PERIOD	8560	89	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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

Enter on page 1, line 6

* 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.

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
2-9-11 ↓ 3-29-11	Buckley William D.	32 Tadarola Ave Milford	loan from candidate	2,442.89
			Line 18: OUTSTANDING LIABILITIES (ALL)	2,442.89

Enter on page 1, line 7