



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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2017 MAY -1 PM 2:25
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3-18-2017 Ending Date: MILFORD, MASS 01757

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

William D Buckley
Candidate Full Name (if applicable)
Selectman Milford, MA
Office Sought and District
32 Iadarola Ave Milford, ma 01757
Residential Address
Telephone Number (optional): _____

Committee to Re-elect Bill Buckley
Committee Name
Benjamin Roy
Name of Committee Treasurer
32 Iadarola Ave Milford, ma 01757
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>796.52</u>
Line 2: Total receipts this period (page 2, line 11)	<u>3000.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3796.52</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>3796.52</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 4)	<u>39.06</u>
Line 7: Total (all) outstanding liabilities (page 4)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Milford Federal Bank</u>

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: _____ (Treasurer's signature) Date: 4/30/17

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.
 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 committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: William D Buckley (Candidate's signature) Date: 4/30/17

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)
3-30-2017	Brian Bodio 10 Ferguson St Milford ma	50. ⁰⁰	
3-30-2017	Eva Bodio 10 Ferguson St Milford ma	50. ⁰⁰	
4-3-2017	Paul & Roseanne Fitzpatrick 3 Tara Circle Milford MA	100. ⁰⁰	
3-30-2017	Kevin Meehan 8 Oxbridge Rd Mendon MA	300. ⁰⁰	Business owner Imperial Automotives
3-23-2017	Richard Morrison 47 S Bow St Milford MA	100. ⁰⁰	
3-21-2017	Harold & Marcia Rhodes 11 Janack Rd Milford MA	2000. ⁰⁰	Retired
3-24-2017	Paul Sharp 27 Hancock St Milford MA	100. ⁰⁰	
3-23-2017	William Smith 5 Ferguson St Milford MA	100. ⁰⁰	
3-23-17	Rosemary & Steve Trettel 9 Ferguson St Milford	200. ⁰⁰	retired
Line 9: Total Receipts over \$50 (or listed above)		2900. ⁰⁰	
Line 10: Total Receipts \$50 and under* (not listed above)		100. ⁰⁰	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3000.00	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4-13-17	Alicante	84 Uxbridge Rd Mendon, ma	Campaign Volunteer dinner	621. ⁷³
4-28-17	William Buckley	32 Iadarola Ave milford, ma	Election Loan payback	1265. ⁹⁸
4-3-17	Mac's Store	96 Prospect St milford, ma	Election Night Supplies	189. ⁵³
4-13-17	Nelly's Restaurant Sandwich Shop	113 Central St milford ma	Election Night Food	349. ⁹⁵
4-5-17	Ridgewood Printng Co	5 Fayette St milford, ma	Political Makers	1,369. ³³
Line 12: Total Expenditures over \$50 (or listed above)				3796. ⁵²
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				3796. ⁵²

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
4-10-2017	Ryan Fattman	Webster, Ma	Automated Call Service	39. ⁰⁶
* 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.				Line 15: In-Kind Contributions over \$50 (or listed above)
Enter on page 1, line 6 →				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				39.06
Line 17: TOTAL IN-KIND CONTRIBUTIONS				39.06

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
Enter on page 1, line 7 →				Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)