



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2013 JAN 22 AM 10:01

MILFORD, MASS

Fill in dates:

Reporting Period Beginning May 4 2012 Ending Jan 21 2013

Type of report: (Check one)

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

Michael Denice

Full Name of Candidate (if applicable)

Selectman

Office Sought and District

22 Debbie Ln

Residential Address

Milford, MA 01757

Tel. No. (optional)

Committee to Elect Michael Denice

Committee Name

Maureen Maloney

Name of Committee Treasurer

22 Debbie Ln

Committee Mailing Address

Milford, MA 01757

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ - 97.79
Line 2: Total receipts this period (page 2, line 11)	\$ 597.79
Line 3: Subtotal (line 1 plus line 2)	\$ 500.00
Line 4: Total expenditures this period (page 3, line 14)	\$ 500.00
Line 5: Ending balance (line 3 minus line 4)	\$ - 0 -
Line 6: Total in-kind contributions this period (page 4)	\$ -
Line 7: Total (all) outstanding liabilities (page 4)	\$ -
Line 8: Name of bank(s) used	<u>Sovereign 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:

Maureen Maloney
Treasurer's signature (in ink)

1/21/13
Date

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:

Michael Denice
Candidate signature (in ink)

1/21/13
Date

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)
6/15/12	Michael Denice (Jean Porginen) 22 Debbie Ln Milford	500	-	Flight crew Aer Lingus
6/15/12	Michael Denice 22 Debbie Ln Milford	97	79	" "
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		597	79	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.
Page 2

