

## Form CPF 101: STATEMENT OF ORGANIZA

2017 PED 14 AM 11: \$5

File with: Director

Office of Campaign and Political Finance One Ashburton Place, Room 411, Boston, MA 02108 2017 FEB 10 A 11: 40

(617) 979-8300 / (800) 462-OCPF

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	Full Name:	Willia	im D. Bu	ickley		
	Residential Address:	32	Iadarola	avenue		
	City / State / Zip:	Milfo		01757		
	Email Address:	billbu	ckley 100 ver	izon, net	Phone #:	508981-5720
	Party Affiliation:	NA				(If applicable)
OFFICE SOUG	HT/PIJRPOSE:					
0111025000	Title:	Solori	tman			
	District:		ard ma			
			ara ma			
COMMITTEE:	Name of Committee:		immittee to	Elect Bill Buckl	e Y	
			(The name of the comm	ittee must include the candidate's last n		
	Committee Mailing A	_3/		ave		
OFFICERS:	City / State / Zip:		lilford	<u>Ma 01757</u>	Phone #	508-981-5720
Chairman:	Beth Fraser			Treasurer*: Benjan	vio R	07
Residential Address:	12 Camp	Sł		Residential Address: 8 Reago	in Ra	20
City / State / Zip:	nilford m	10 017	57			01757
Email: Deth & F	rasermail.co	M Phone	#:617-645-0067		1	
				* A public employee may not serve as		
	(Atta	ach an addition	al page, if necessary, with	other officers and finance committee, i	f any.)	
I hereby consent to the behalf. I am aware th the relevant election. SIGNED UNDER TH	at candidates are requ	uired to keep	stand that a candidate s detailed accounts and r Landidate's signature	chall not give consent to the organize ecords of all campaign finance activates	ation of mo	ore than one committee on his/her eriod of six years from the date of  Date: 2/6/17
that: 1) I am subject to and records of all cam	o certain duties and lis paign finance activity loyee, I must resign th on his/her behalf.	abilities unde y for a period his position a	r M.G.L. c. 55, including of six years from the d	that I am not a public employee as ng the timely filing of campaign fin ate of the relevant election; 2) if aft resignation; and 3) a candidate may	ance report ter my acce	s and keeping detailed accounts ptance of this office I become an
I hereby accept the off SIGNED UNDER TH			ed committee. Chairman's signatur	en Gare	<u></u>	Date: 2/7/17



# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

RECEIVED

Office of Campaign and Political Finance

TOWN CLERK'S OFFICE

2017 MAR 27 AM 9: 09 Fill in Reporting Period dates: Beginning Date: 5-12-14 Ending Date: Type of Report: (Check one) 8th day preceding election 8th day preceding preliminary 30 day after election year-end report dissolution am to Ke-elect Office Sought and District 7, Iford Mi 01757 Committee Mailing Address ourkleu laverizon, ne \_roy ā vahoo .com Phone # (optional): Phone # (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 208.68 Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 796.52 Line 5: Ending Balance (line 3 minus line 4) **Line 6:** Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) 2000.00 Bank Federal Line 8: Name of bank(s) used: 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) FOR CANDIDATE FILINGS ONLY: 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:

(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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2.5-17	Barlow, Raymond 7 Park Lane Gue Hilford	1000°C	Federal Reserve Bank Analyst
2-5-17	Barlow, Taryn 4 Park Lane Que Milford	1000000	Sperin Pathologist Milford Medical Ctr
33-17	Brutsh, David Z Kalen Circle	10000	
3-3-17	Buckley, David 11 Susans Way Franklin Ha	100000	
1-30-17	Buckley, William 32 Iadarala Gue Milford	20000	Bose comp Global Supplier Engineer
2-4-17	Correia, Alberto 3 Leah Lone Milford	10000	
33-17	Delfanti, Thorias 8 South Terrace. Milford	20000	self employed whithoulle Honument
3-3-17	Diorio, Michael 11 Calvin Dr Milford	10000	
2-11-17	Doiron, Raymond 252 Purhose St Hilford	30000	seifemployed
2-6-17	Goncalues, Lucinda Po Box 316 Mendon	500°°	seif exployed
3.3-17	Grimes, Harlen 16 Vassar Dr Hilford	1000	
3-3-17	Kingtade, Geraldine 77 Purchase St Hilford	10000	
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	0. First 10 short	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)**

SCHEDULE A: RECEIP 18 (continued)						
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)			
3-3-17	King kade, Lisa 50 Woodridge Rd Milford	10000				
33-17	Lioce, Joshua 97 HighlandSt Milbrd	10000				
33-17	Ross, Edward 89 Prospect Hots Hilford	10000				
2-7-17	Sanborn, William 10 Virginia Dr Hilford	10000				
3-6-17	Scandone, Peter 16 Rockwood Ln Upton	10000				
3.8-17	Usher, Keith 179 BlockstoneSt Mendon	30000	Self-employed			
2-6-17	Vaz, Ana PO Box 553 Milford	500°°	Self employed			
2-5-17	Vaz, Roy 13 Highland St Hilford	10000	Self employed			
3-8-17	Vieira, Jose 1 Hanel Circlo Milford	10000				
ine 9: Total Receip	ts over \$50 (or listed above)	800000				
ine 10: Total Receip	ots \$50 and under* (not listed above)	440.00				
ine 11: TOTAL RI	ECEIPTS IN THE PERIOD	00	← Enter on page 1, line 2			
f you have itemized r	eceints of \$50 and under include them in line	0 I in a 10 charald	limateria anti-stress and the stress			

#### 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	
3-17-17	Chase-Vista Print Visa	PO Box 1423 Charlotk, NC	Mail Flyers - Political	1523,77	
3-3-17	Hobeken Club	252 Central St Hilford, Ha	Hall Rental	22500	
3.3.17	Piazza Calering	Calvin Dr Milford Ma	Rally event-food	40000	
2-22-17	Postmaster Hilford	congress St Milford Ma	Stamps	40.80	
2-17-17	Ridgewood Printes	5 Fayetk St milford ma	Handout Flyers	11800	
1-31-17	Town Crier	48 Hahanic St Upton, Ha	Newspaper Advertise Head	511°0	
2-17-17	Town Crier	48 Hechanic St Upon, Ha	Newspaper Advertisement	551°°	
3-1-17	Town Crier	48 Hechanic St Upton, Ha	Newspaper advertisement	W7100	
3-22-17	Town Crier	48 Hechanic St lepton, Na	Newspaper advertisohert	1,022.00	
3-22-17	Universal Tag Inc	36 Hall Road Dudley Ha 01571	Political Flyers	2,149 99	
2.24-17	WHRC-FH 101.3	258 Main St Hilford Wa	Politial Radio Advertisement	604.80	
3-17-17	WHRC-FH 101.3	258 Hain St Milford, Ma	Political Radio Advertisement	64.80	
Line 12: Total Expenditures over \$50 (or listed above)					
	Line 13: Total Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD		
TC to an a training	ized expenditures of \$50 and under	1 1 1 d 1 10 T1 10 1	111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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)**

Date Paid	To Whom Paid (alphabetical listing)	4 7 7	1	
- 11		Address	Purpose of Expenditure	Amount
3-17-17	Zaxgar Design	HG5 Plank Rd Carthage, NC 28327	Political Advertisement Design	17000
		Line 12: Expenditures over \$50	(or listed above)	7852.16
		Line 13: Expenditures \$50 and u	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	7852.16

<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
3-1-17	Barlow, Lori	5 B Congress St Milford, Ha	tx6 Political Postcords	59.77
			·	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	59,77
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	59.77

<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
1-30-17	Bockley, William	32 Iadarola Gue Milloni, ma	Political Loon - self	20000