

Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

HECEIVED

2011 MAY -3 PM 4: 04

Date

File with:

City or Town Clerk or Election Commission

Candidate signature (in ink)

Please print or type all information, except signatures.

I III III dates.	Year Month Date Year Ending 05 - 4 - 1/
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election	on □30 day after election □year-end report □dissolution
WILLIAM D. BUCKLEY Full Name of Candidate (if applicable) BOARD OF SELECT MAN Office Sought and District 32 JADAROLA AVE. M. I FORD, MA 01757 Residential Address Tel. No. (optional)	Committee To Elect Bill Buckley Schelman Committee Name JYLL M. Buckley Name of Committee Treasurer 32 Indarola Ave. Milford, MA 01757 Committee Mailing Address Tel. No. (optional)
Line 1: Ending balance from pr Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus Line 6: Total in-kind contribution Line 7: Total (all) outstanding lial	d (page 2, line 11) \$ 234.38 \$2961.50 period (page 3, line 14) \$ 2763.32 as line 4) \$ 198.18 as this period (page 4) \$ 4
campaign finance activity including all contributions loans, receipts, expe	d it is, to the best of my knowledge and belief, a true and complete statement of all enditures, disbursements, in-kind contributions and liabilities for this reporting period the authority or on behalf of this committee in accordance with the requirements of es of perjury: 5-3-11 Date
FOR CANDIDATE FILINGS C	ONLY: (CANDIDATE MUST SIGN BELOW)
campaign finance activity, of all persons acting under the authority or of have not received any contributions, incurred any liabilities nor made any Candidate without Committee OR Candidate with independent act I certify that I have examined this report including attached schedules an compaign finance activity, including contributions, loans, receipts, expensions.	and it is, to the best of my knowledge and belief, a true and complete statement of all on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I expenditures on my behalf during this reporting period. Livity filing separate report and it is, to the best of my knowledge and belief, a true and complete statement of all additures, disbursements, in-kind contributions and liabilities for this reporting period the authority or on behalf of this committee in accordance with the requirements of

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)		ount	Occupation & Employer (for contributions of \$200 or more	
				The second secon	
	e Particular de Aporto (1870) en la companya de la La companya de la co				
Line 9:	Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)		234	38		
	TOTAL RECEIPTS IN THE PERIOD	234	38	- [1] [1] [1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [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.

This page may be copied 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	
	(aiphabeticar iisting)				
		143 62000000000000000000000000000000000000	Exection holy hi		
4-5-11	CAFE SORRENTO	MILFORD, MA 01757		148	62
4-5-11	GENES VARIETY	80 WATER ST MILFORD, MA 01757	ELECTION DAY FOOD FOR SIGN HOLDERS	131	
3-30-11	TOWN CRIEN PUBLICATIONS	48 Mechanic ST UPTON, MA 01568	PRITICAL ADS (BALANCE)	40	00
5-3-11	William D. Buckley	32 IADAROLA AVE. MILFORD, MA 61757	REIMBURSEMENT OF LOAN	2442	
					Barata.
		•			
		san garage de la estada de la companya de la compa	androven de de la company		
7					
		Line 12:	Expenditures over \$50		
		Line 13:		an and	
T	Enter on page 1, line 4		TOTAL EXPENDITURES	2012	20

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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