



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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MILFORD, MASS

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month April Date 5 Year 2011 Ending Month March Date 26 Year 2012

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 Lane

Residential Address

508-634-7858

Tel. No. (optional)

Committee to elect Michael Denice

Committee Name

Maureen Maloney

Name of Committee Treasurer

22 Debbie Lane, Milford, MA.

Committee Mailing Address

508-634-7858

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
Line 2: Total receipts this period (page 2, line 11) \$ 1,555.-
Line 3: Subtotal (line 1 plus line 2) \$ 1,555.-
Line 4: Total expenditures this period (page 3, line 14) \$ 1,006.24
Line 5: Ending balance (line 3 minus line 4) \$ 548.76
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 1200
Line 8: Name of bank(s) used Sovereign 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:

Maureen Maloney
Treasurer's signature (in ink)

3/26/12
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)

3/26/12
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)
2/7/12	Joe + Jen Carroll 564 Pirates Ln Manahawkin, NJ 08050	100 —	
2/7/12	James Davis 5201 Sherier Pl. NW Washington, DC 20016	100 —	
3/8/12	Michael Denise (Loan) 22 Debbie Ln Milford, MA 01757	500 —	Aviation Contractor Aer Lingus
3/24/12	Michael Lenza 54 Camp St Milford, MA 01757	100 —	
3/9/12	Maureen Maloney 22 Debbie Ln Milford, MA 01757	500 —	Nurse Practitioner umass Memorial Medical Ctr.
2/7/12	Arthur Scallia, MD 54 Hopedale St. P.O. #4 Hopedale, MA 01747	100 —	
Line 9: Total receipts in excess of \$50 (or listed above)		\$ 1400 —	
Line 10: Total receipts \$50 and under* (not listed above)		\$ 155 —	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$ 1555 —	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

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	
2/24/12	Big Daddy's	1319 Green Forest CT Suite 409 Winter Garden, FL 34787	Signs	\$ 507	64
3/5/12	Conquest Graphics	3900 Carolina Ave Richmond, VA 23222	Door hangers	\$ 308	13
2/25/12	Shaw's	Prospect St. Milford, MA	Food + misc for meet + Greet	\$ 106	26
Line 12: Expenditures over \$50				\$ 922	63
Line 13: Expenditures \$50 and under*				\$ 84	21
Line 14: TOTAL EXPENDITURES				\$ 1006	24

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/8/12	Michael Denice	mm 3/26/12		
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

* 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
3/8/12	Michael Denice	22 Debbie Ln Milford, MA 01757	Loan	\$ 500.-
3/9/12	Town Crier	48 Mechanic St Upton MA 01568	Advertising	\$ 245.-
3/23/12	Town Crier	48 Mechanic St Upton MA 01568	Advertising	\$ 455.-
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	\$ 1200.-



Form CPF M101: STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

File with: City / Town Clerk or Election Commission

2012 FEB 9 PM 4:07

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:	<u>Michael Denice</u>		
	Residential Address:	<u>22 Debbie Lane</u>		
	City / State / Zip:	<u>Milford, MA 01757</u>		
	E-Mail Address:	<u>M.Denice@ymail.com</u>	Phone #:	<u>508-259-9908</u>
	Party Affiliation:	_____ (If applicable)		
OFFICE SOUGHT/PURPOSE:	Title:	<u>Board of Selectman</u>		
	District:	_____		

COMMITTEE:	Name of Committee:	<u>Committee to Elect Michael Denice</u> (The name of the committee must include the candidate's last name)		
	Committee Mailing Address:	<u>22 Debbie Ln</u>		
	City / State / Zip:	<u>Milford</u>	<u>MA</u>	<u>01757</u> Phone #: <u>508-259-9908</u>

OFFICERS:

Chairman:	<u>Michael Maloney</u>	Treasurer:	<u>Maureen Maloney</u>
Residential Address:	<u>22 Debbie Ln</u>	Residential Address:	<u>22 Debbie Ln</u>
City / State / Zip:	<u>Milford</u> <u>MA</u> <u>01757</u>	City / State / Zip:	<u>Milford</u> <u>MA</u> <u>01757</u>
Phone #:	<u>508-634-7858</u>	Phone #:	<u>508-634-7858</u>
Other Officer/Title:	_____	Other Officer/Title:	_____
Residential Address:	_____	Residential Address:	_____
City / State / Zip:	_____	City / State / Zip:	_____
Phone #:	_____	Phone #:	_____

(Complete and attach a Form CPF MA 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Candidate's signature

Date: 2/9/11

I hereby accept the office of Treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Treasurer's signature

Date: 2/9/12

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Chairman's signature

Date: 2/1/12