



Commonwealth
of Massachusetts

File with: Director
Office of Campaign and Political Finance
One Ashburton Place, Room 411, Boston, MA 02108

**Form CPF 101: STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE**
Office of Campaign and Political Finance

CPF ID #:

(For Office Use Only)

(617) 979-8300 / (800) 462-OCPF
ocpf@cpf.state.ma.us
www.mass.gov/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:	First Name:	William	Middle Initial:	E	Last Name:	Kingkade
	Residential Address:	50 Woodnidge Rd				
	City / State / Zip:	Milford, MA 01757				
	Email Address:					
	Party Affiliation: (if applicable)					
	Phone #:	508-328-0006				
OFFICE SOUGHT/PURPOSE:						
	Title:	Selectman				
	District:	Milford				

COMMITTEE:	Name of Committee:	Kingkade Committee				
	(The name of the committee must include the candidate's last name)					
	Committee Mailing Address:	50 Woodnidge Rd				
	City / State / Zip:	Milford, MA 01757			Phone #:	508-328-0006
OFFICERS:	Chair:			Treasurer*:		
	Chrs Mann			Holly Kingkade		
	Residential Address:			Residential Address:		
	51 Woodnidge Rd			Highland St		
	City / State / Zip:			City / State / Zip:		
	Milford, MA 01757			Milford, MA 01757		
Email:			Email:			
Phone #:			Phone #:			
508-353-7607						

* A public employee may not serve as treasurer of any political committee (see reverse).

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: 2-5-18

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) 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; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Treasurer's signature

Date: 2-5-18

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

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature]
Chair's signature

Date: 2-5-18



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1-1-18

Ending Date:

3-26-18

Type of Report: (Check one)

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

William E Kingkade Jr.

Candidate Full Name (if applicable)

Selectman in Milford

Office Sought and District

50 Woodridge Rd

Residential Address

E-mail:

Phone # (optional):

508-473-0020

Kingkade Committee

Committee Name

Holly Kingkade

Name of Committee Treasurer

50 Woodridge Rd

Committee Mailing Address

E-mail:

Phone # (optional):

508-473-0020

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

500.59

Line 2: Total receipts this period (page 3, line 11)

9984.95

Line 3: Subtotal (line 1 plus line 2)

10485.54

Line 4: Total expenditures this period (page 5, line 14)

9371.41

Line 5: Ending Balance (line 3 minus line 4)

\$ 1114.13

Line 6: Total in-kind contributions this period (page 6)

\$ 775 -

Line 7: Total (all) outstanding liabilities (page 7)

\$ 5255

Line 8: Name of bank(s) used:

Milford National 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:

Holly Kingkade

(Treasurer's signature)

Date: 3/26/18

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:

William E Kingkade Jr.

(Candidate's signature)

Date: 3/26/2018

Date	Name	Amount	Address	Profession
2/22/2018	Acquafresca, Henry	\$ 100.00	11 Naples St Milford, Ma 01757	
3/3/2018	Atchue, Innocenza	\$ 105.00	3 Trinity Dr Milford, Ma 01757	
3/3/2018	Bertorelli, Edward	\$ 100.00	15 East Walnut St Milford, Ma 01757	
2/7/2018	Cummings	\$ 100.00	11 Legg St Millville, Ma 01529	
2/23/2011	Digiando, Dennis	\$ 100.00	16 Harvard Dr Milford, Ma 01757	
3/3/2018	Diorio, Michael	\$ 100.00	11 Calvin Dr Milford, Ma 01757	
3/3/2018	Divitto, Steven	\$ 60.00	75 Field Pond Rd Milford, Ma 01757	
3/5/2018	Eddins, Steven	\$ 150.00	13 Tina Rd Milford, Ma 01757	
3/7/2018	Gomes, Domingo	\$ 100.00	PO Box 353 Milford, Ma 01757	
2/6/2018	Julian, Nancy	\$ 200.00	12 Spring St Milford, Ma 01757	Retired
3/3/2018	Kearnan, Jeremy	\$ 100.00	27 Littlefield Rd Milford, Ma 01757	
3/3/2018	Kennelly, Patrick	\$ 250.00	52 Woodridge Rd Milford, Ma 01757	Hillview Rental
2/7/2018	Kingkade, Gerald	\$ 250.00	50 Woodridge Rd Milford, Ma 01757	Retired
3/20/2018	Kingkade, Gerald	\$ 500.00	50 Woodridge Rd Milford, Ma 01757	Retired
2/1/2018	Kingkade, William	\$ 2,000.00	50 Woodridge Rd Milford, Ma 01757	MBTA
3/3/2018	Landry, James	\$ 200.00	51 Madden Ave Milford, Ma 01757	
3/3/2018	Lioce, Josh	\$ 500.00	97 Highland St Milford, Ma 01757	Lioce Properties
2/7/2018	Lioce, Julie	\$ 500.00	91 Highland St Milford, Ma 01757	Lioce Properties
3/3/2018	Lynch, Carla	\$ 75.00	18 Jillson Cir Milford, Ma 01757	
2/7/2018	Maguire, Kara	\$ 100.00	62 Haven St Milford, Ma 01757	
2/7/2018	Mastroianni, Elisa	\$ 100.00	48 Highland St Milford, Ma 01757	
3/3/2018	Rosa, Nicole	\$ 75.00	33 Congress Terrace Milford, Ma 01757	
2/8/2018	Roy, Johanna	\$ 250.00	8 Reagan Rd Milford, Ma 01757	Town of Milford
2/7/2018	Sanborn, William	\$ 100.00	10 Virginia Dr Milford, Ma 01757	
2/2/2018	Sharp, Paul	\$ 250.00	27 Hancock St Milford, Ma 01757	Retired
2/26/2018	Soares, Irene	\$ 125.00	12 Yacht Ave West Yarmouth, 02673	
2/7/2018	Soares, Joseph	\$ 100.00	21 Mill Pond Cir Milford, Ma 01757	
2/7/2018	Soares, Michael	\$ 100.00	2 Daniel Dr Milford, Ma 01757	
3/3/2018	Wilson, Catherine	\$ 100.00	1A Jillson Cir Milford, Ma 01757	
	Over\$50	\$ 6,790.00		
	Under \$50	\$ 3,194.95		
	Total	\$ 9,984.95		

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)
2-2-18	Henry Acquafresca 11 Naples St. Milford	\$100	
3-3-18	Atchue, Innocenza 3 Trinity Dr. Milford	\$105	
3-3-18	Bertorelli, Edward 15 East Walnut St. Milf.	\$100	
2-7-18	Cummings 11 Legg St. Milford	\$100	
2-23-18	Digiardo, Dennis 16 Harvard Dr. Milf.	\$100	
3-3-18	Diorio, Michael 11 Calum Dr. Milf.	\$100	
3-3-18	Divitto, Steven 75 Field Pond Rd. Milf.	\$60	
3-5-18	Edding, Steven 13 Tina Rd. Milf.	\$150	
3-7-18	Gomes, Domingo P.O. Box 353 Milf.	\$100	
2-6-18	Julian, Nancy 12 Spring St. Milf.	\$200	Retired
3-3-18	Kearnan, Jeremy 57 Littlefield Rd. Milf.	\$100	
3-3-18	Kennelly, Patrick 53 Wardside Rd. Milf.	\$250	Hillview Rental
Line 9: Total Receipts over \$50 (or listed above)		6790	
Line 10: Total Receipts \$50 and under* (not listed above)		3194.95	
Line 11: TOTAL RECEIPTS IN THE PERIOD		9984.95	← 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.

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(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)
2-7-18 3-20-18	Kingkade, Geraldine 50 Woodridge Rd. M.H.	\$750	Retired
2-1-18	Kingkade, William 50 Woodridge Rd M.H.	\$2000	MBTA Loan to Committee
3-3-18	Landry, James 51 Madden Ave. M.H.	\$200	
3-3-18	Lioce, Josh 97 Highland St M.H.	\$500	Lioce Properties
2-7-18	Lioce, Julie 97 Highland St M.H.	\$500	Lioce Properties
3-3-18	Lynch, Carla 18 Jillson Cir. M.H.	\$75	
2-7-18	Maquire, Kara 63 Haven St. M.H.	\$100	
2-7-18	Mastrianni, Elisa 48 Highland St. M.H.	\$100	
3-3-18	Rosa, Nicole 33 Congress Terr. M.H.	\$75	
2-8-18	Roy, Johanna 208 Reagan Rd M.H.	\$250	Town of Milford
2-7-18	Sutern, William 10 Virginia Dr. M.H.	\$100	
2-2-18	Sharp, Paul 27 Hancock St M.H.	\$250	Retired
Line 9: Total Receipts over \$50 (or listed above)		6790	
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(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)
2-26-18	Saunders, Irene 12 Kicht Ave. West Yarmouth MA 02673	\$125	
2-7-18	Saunders, Joseph 21 Mill Pond Cir. Mill	\$100	
2-7-18	Saunders, Michael 2 Daniel Dr. Mill	\$100	
3-3-18	Wilson, Catherine 14 Jillson Cir. Mill	\$100	

Line 9: Total Receipts over \$50 (or listed above)

6790

Line 10: Total Receipts \$50 and under* (not listed above)

319495

Line 11: TOTAL RECEIPTS IN THE PERIOD

998495

← 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.