



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

10 APR 21 PM 3:53

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning

Month

6-1-10

Date

Year

2010

Ending

Month

4

Date

11

Year

10

Type of report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

JOSEPH F COGGINS

Full Name of Candidate (if applicable)

Selectman MILLBURY

Office Sought and District

10 T. FERRY CIRCL

Residential Address

Tel. No. (optional)

Committee To Re-elect JOSEPH COGGINS

Committee Name

Ronald Marshall

Name of Committee Treasurer

8 WEST ST MILLBURY

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 0

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

\$ 7331.00

Line 3: Subtotal (line 1 plus line 2)

\$ 7331.00

Line 4: Total expenditures this period (page 3, line 14)

\$ 3835.92

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

\$ 3495.08

Line 6: Total in-kind contributions this period (page 4)

\$ 0

Line 7: Total (all) outstanding liabilities (page 4)

\$ 0

Line 8: Name of bank(s) used MILLBURY SAVINGS 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:

Treasurer's signature (in ink)

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:

Candidate signature (in ink)

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)
2/28/10	NORMAN AUDREY SR 16 GROVE ST MILLBURY MA	150 00	AUDREY'S AUTO BODY OWNER
2/28/10	NORMAN AUDREY SR 9 JUNIPER DR MILLBURY	150 00	AUDREY'S AUTO BODY OWNER
2/28/10	AL BODON 22 PARK HILL AVE	100 00	RETIRED
2/28/10	NICK BUFFONE 4 MINNIE RD	100 00	
2/28/10	JOEL CHARLSON 33 MILLS ST	100 00	
2/28/10	MICHAEL COULSON 5 JESSICA J DRIVE MILLBURY MA	100 00	
2/28/10	NICK DILIDDO	100 00	
2/28/10	JOHN DIRENZO 27 DAVIS RD	100 00	
2/28/10	FADI & BETH EL-MASSIH SOUTHBURY MA	1,000 00	OWNERS RIVERSIDE MART
2/28/10	FRANCIS FORD PAXTON MA	100 00	
2/28/10	MARK GORREMI 1 PROVIDENCE ST	95 00	
2/28/10	GLEN & DIANA HARRIS 18 NICOLE DR	100 00	
2/28/10	FRED MCGONAHY 5 ROLLIE SHEPARD	200 00	
2/27/10	KAREN POLITO & FAMILY SHREWSBURY MA	100 00	
2/28/10	DAVID & PAM PERKINS 10 HOWE LANE MILLBURY MA	200 00	OWNERS MILL TOWN TAVERN
Line 9: Total receipts in excess of \$50 (or listed above)		2675 00	
Line 10: Total receipts \$50 and under* (not listed above)		4656 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		7331 00	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.

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	
3/6/10	A&D CATERING	51M ST MILLBURY	CATERING Candidate's Breakfast	530	00
4/1/10	DEMOCRATIC TOWN COMMITTEE		DONATION	100	00
4/13/10	PAUL DIACIO	1 Bella Rosa DR	Food Supplies Senior Supper	197.	57
3/15/10	EARLY CAMPAIGN TO RE-ELECT	WORCESTER, MA	DONATION	100.	00
4/1/10	FLORAL BOUTIQUE	MILLBURY AVE	FLOWERS	100	88
3/31/10	PAT HAYES	41 CAROUSEL	PHOTOGRAPH FOR LARGE SIGN	147	68
2/21/10 3/7/10	QUICK STOP SIGN PRINTING.	SHAWBURY ST WORCESTER	PRINTING + SIGNS	2,216	79
3/22	WALK TO CURE CANCER		DONATION	100	00
Line 12: Expenditures over \$50				3492	92
Line 13: Expenditures \$50 and under*				343	00
Line 14: TOTAL EXPENDITURES				3835	92

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
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	0

* 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
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	