

Ian Buckley



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: 10/21/25 Ending Date: 12-5-25

Type of Report: (Check one)

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

Ian M. Buckley

Candidate Full Name (if applicable)

Methuen City Council

Office Sought and District

240 Hampstead Street, Methuen, MA. 01844

Residential Address

E-mail: ianbuckley2002@gmail.com

Phone #: (978) 609-3044

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone #:

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 12)	<u>0.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0.00</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>0.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0.00</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0.00</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0.00</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>448.00</u>
Line 9: Name of bank(s) used:	<u>Santander Bank</u>

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) Date: _____

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Ian M. Buckley (Candidate's signature) Date: 11/20/25

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	

SCHEDULE A: RECEIPTS (continued)[illegible]

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00

Enter expenditure totals on Page 5

SCHEDULE B: EXPENDITURES (continued)[illegible]

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00

** If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.*

Enter on page 1, line 6 →

Line 16: In-Kind Contributions over \$50 (or listed above)	0.00
Line 17: In-Kind Contributions \$50 and under (not listed above)	0.00
Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD	0.00

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

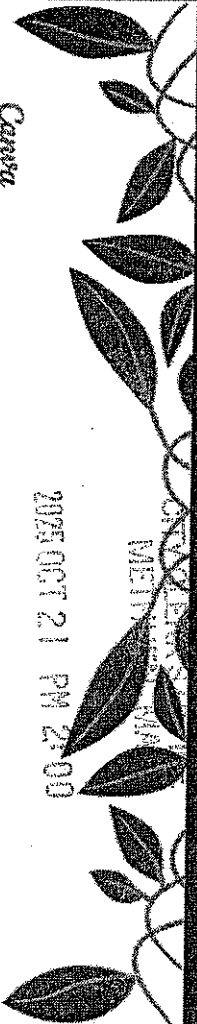
Date Incurred	To Whom Due	Address	Purpose	Amount
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
Enter on page 1, line 7 → Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)				0.00

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
09/18/2025	Canva US inc 3212 E. Cesar Chavez Street, Building 1, suite 1300, Austin, TX. 78702	230.00	10 yard signs - advertise
09/23/2025	Canva US inc 3212 E. Cesar Chavez Street, Building 1, suite 1300, Austin, TX. 78702	218.00	1000 door hanger - advertise
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)		448.00	<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i>
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)		0.00	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		448.00	

← Enter on page 1, line 8



CHINA
METALWORKS, INC.

2005 OCT 21 PM 2:00

China

Tax Invoice

Invoice Date
September 23, 2005

Invoice no.
04648-56871993

To
Ian Buckley
ianbuckley2002@gmail.com

Shipping Address
240 Hampshire St
Roslindale
Massachusetts 01944
United States

Print Items
1000 Door Hangers
JAS07-PK8
September 23, 2005

US\$210.00

Shipping fee	US\$38.00
Total	US\$210.00
Includes tax	US\$12.35
Total charged	US\$210.00

Thanks much for your records.
China US Inc.
3212 E. Chase Owens Street, Building 1, Suite 100 Austin Texas 78702 United States
Copyright © 2005 China US Inc. All rights reserved.

Door Hangers



Canva

Tax Invoice

Invoice Date

September 18, 2025

Invoice no.

04643-63611727

To

Ian buckley

ianbuckley2002@gmail.com

Shipping Address

240 Hampstead St

Methuen

Massachusetts 01844

United States

Print Items

10 Yard Signs

iAGzXmiYSWA

September 18, 2025

US\$230.00

RECEIVED
CITY CLERKS OFFICE
METHUEN, MA

2025 OCT 21 PM 2:00

Shipping fee

Free

Total

US\$230.00

Includes tax

US\$13.53

Total charged

US\$230.00

Please retain for your records.

Canva US Inc.

3212 E. Cesar Chavez Street, Building 1, Suite 1300 Austin Texas 78702 United States

Copyright © 2025 Canva US Inc.. All rights reserved.

Yard signs



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

2025 NOV 13 PM 3:21

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/21/25 Ending Date: 12/3/25

Type of Report: (Check one)

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

Ian M. Buckley

Candidate Full Name (if applicable)

Methuen City Council

Office Sought and District

240 Hampstead Street, Methuen, MA. 01844

Residential Address

E-mail: ianbuckley2002@gmail.com

Phone #: (978) 609-3044

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone #:

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 12)	<u>0.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0.00</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>0.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0.00</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0.00</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0.00</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>448.00</u>
Line 9: Name of bank(s) used:	<u>Santander Bank</u>

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) Date: _____

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Ian M. Buckley (Candidate's signature) Date: 11/20/25

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
	N/A	0.00	
Line 10: Total Receipts over \$50 (or listed above)		0.00	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>
Line 11: Total Receipts \$50 and under (not listed above)		0.00	
Line 12: TOTAL RECEIPTS IN THE PERIOD		0.00	

← Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00

Enter expenditure totals on Page 5

SCHEDULE B: EXPENDITURES (continued)[illegible]

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00

** If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.*

Enter on page 1, line 6 →

Line 16: In-Kind Contributions over \$50 (or listed above)	0.00
Line 17: In-Kind Contributions \$50 and under (not listed above)	0.00
Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD	0.00

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

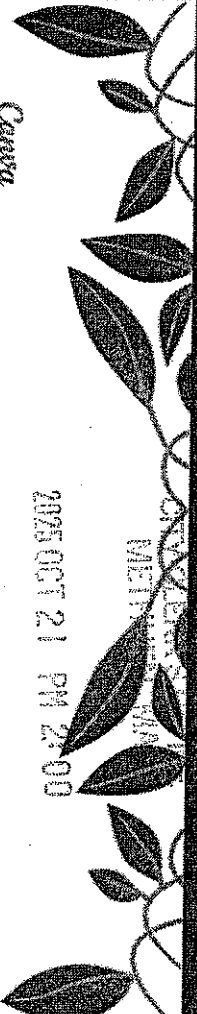
Date Incurred	To Whom Due	Address	Purpose	Amount
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
	N/A			0.00
<div style="display: flex; justify-content: space-between; align-items: center;"> Enter on page 1, line 7 → Line 19: TOTAL OUTSTANDING LIABILITIES (ALL) </div>				0.00

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
09/18/2025	Canva US inc 3212 E. Cesar Chavez Street, Building 1, suite 1300, Austin, TX. 78702	230.00	10 yard signs - advertise
09/23/2025	Canva US inc 3212 E. Cesar Chavez Street, Building 1, suite 1300, Austin, TX. 78702	218.00	1000 door hanger - advertise
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)		448.00	<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i>
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)		0.00	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		448.00	

← Enter on page 1, line 8



2025 OCT 21 PM 2:00

Canva

Tax Invoice

Invoice Date
September 23, 2025
Invoice no.
0494-5607196

To
ian buckley
ianbuckley2002@gmail.com

Shipping Address
240 Hampstead St
Boston
Massachusetts 02184
United States

Print Name
1000 Door Hangers
IAG07-PK8
September 23, 2025

US\$210.00

Shipping fee	US\$8.00
Total	US\$218.00
Includes tax	US\$12.35
Total charged	US\$210.00

Please retain for your records.
Canva US Inc.
322 E. 57th Street, Suite 100
New York, NY 10022
Copyright © 2025 Canva US Inc. All rights reserved.

Door Hangers



Canva

Tax Invoice

Invoice Date
September 18, 2025

Invoice no.
04643-63611727

To
ian buckley
ianbuckley2002@gmail.com

Shipping Address
240 Hampstead St
Methuen
Massachusetts 01844
United States

Print Items

10 Yard Signs
iAGzXmiYSWA
September 18, 2025

2025 OCT 21 PM 2:00

RECEIVED
CITY CLERK'S OFFICE
METHUEN, MA

US\$230.00

Shipping fee	Free
Total	US\$230.00
Includes tax	US\$13.53
Total charged	US\$230.00

Please retain for your records.

Canva US Inc.

3212 E. Cesar Chavez Street, Building 1, Suite 1300 Austin Texas 78702 United States

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Yard Signs