

Form CPF M 102: Campaign Finance Report ARLINGTON. MA 02174 Municipal Form

2014 JAN 21 AM 9: 38 Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 05/07/20/3 Ending Date: 12/31/20/3					
Type of Report: (Check one)					
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution					
Paul Schlichtman Candidate Full Name (if applicable) Committee to Elect Paul Schlichtman Committee Name					
School Committee, Arlington Camilla B. Haase Office Sought and District Name of Committee Treasurer					
47 Mystic St., #8C, Arlington, MA 02474 Residential Address Residential Address Residential Address					
Telephone Number (optional): Telephone Number (optional):					
SUMMARY BALANCE INFORMATION:					
Line 1: Ending Balance from previous report 253, 99					
Line 2: Total receipts this period (page 3, line 11)					
Line 3: Subtotal (line 1 plus line 2)					
Line 4: Total expenditures this period (page 5, line 14)					
Line 5: Ending Balance (line 3 minus line 4)					
Line 6: Total in-kind contributions this period (page 6)					
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: Leader 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) Date:					
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 of oh behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: (Candidate's signature) 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.

(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)
e 9: Total Receip	ots over \$50 (or listed above)		
e 10: Total Recei	pts \$50 and under* (not listed above)		
ie 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ine 9: Total Receip	ts over \$50 (or listed above)		
	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		← 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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)				
	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
12/23/13	Arlington Educati	n P.O.Box80	Charitable	
海山马	Foundation	Arlington MA 02476	Contribution	100,00
	2 /-	180 Mass. Ave.	Inactive	
7/31/13	Leader Bank	Arlington, MA 02474	Account fee	10.00
		Line 12: Total Expenditures over	er \$50 (or listed above)	110.00
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITU	URES IN THE PERIOD	110.00
	zed expenditures of \$50 and under	include them in line 12. Line 12 ch	auld include only those expenditure	

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

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
-				
P				
Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)				
	1000 1000	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

^{*} 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 on page 1.

Date Received	From Whom Received*	Residential Address Description of Contribution		Value
		Line 15: In-Kind Contributions over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	e 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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.

Page 6

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
4/1/2013	Paul Schlichtman	47 Mystic St. #8C Arlington MA 02474	Loan to Campaign	630,00
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	OING LIABILITIES (ALL)	630.00



Schedule E Disclosure of Assets Statement Office of Campaign and Political Finance

File with: Director					
Office of Campaign and Political Finance			CPF ID#		
One Ashburton Place Boston, MA 02108 (617) 727-8352					
This form should be filed by	all candidates	and committees with each	vear end and each dis	solution report	
Committee Name: Committee					
Committee Name.	10 0 1001	Took. SCHILLETING	Date of r	eport: 12/-110	
All ca	All candidates and committees must fill in part A or part B.				
Part A:					
No assets* were acquired or disp	osed of by this	candidate/committee dur	ing the period covered	by this statement.	
Part B: Assets acquired: List all assets acquired:	ired since the co	ommittee last filed this sta	atement If this is the fi	rst Schedule E vou	
have filed, list all assets.					
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value	
Assets disposed of: List all assets sol	ld, traded or tra	nsferred during the report	ting period covered by t	his statement.	
Asset	Date	Disposition to:	Date and Manner	Disposition Value	
Include year, model or other identifying information, if applicable.	Acquired	Name and Address	of Disposition	Attach statement of how value is determined.	
Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.					
*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.					
Signed under the penalties of perjury: Signed under the penalties of perjury:					
205000	1/2-12	,	amilla B. Haa	1 9	
Candidate signature Date	1016		asurer signature	Date	

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

5/95