

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

2020 MAY 29 PM 1: 37

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1	020 Ending Date: 5/29/2020		
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Type of Report: (Check one)			
☐ 8th day preceding preliminary	30 day after election year-end repor	rt dissolution	
Paul Schlichtman	Committee to Elect Paul Schlichtman		
Candidate Full Name (if applicable)	Committee Name		
School Committee, Arlington	Camilla B. Haase		
Office Sought and District	Name of Committee Treasur		
47 Mystic St., Apt. 8C, Arlington, MA 02474 Residential Address	88 Park Ave., Apt. 401 Arlington, MA 02476 Committee Mailing Address		
E-mail: paul@schlichtman.org	E-mail: c.haase@comcast	200	
Phone # (optional):	Phone # (optional):		
SUMMARY BALAN	CE INFORMATION:		
Line 1: Ending Balance from previous report	10	65.74	
Line 2: Total receipts this period (page 3, line 1		6,615	
Line 3: Subtotal (line 1 plus line 2)	6,71	80.74	
Line 4: Total expenditures this period (page 5, 1)	ne 14) 6,39	93.67	
Line 5: Ending Balance (line 3 minus line 4)	3:	87.07	
Line 6: Total in-kind contributions this period (age 6)	0	
Line 7: Total (all) outstanding liabilities (page	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 bactivity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury: Camulla B. Hause	contributions and liabilities for this reporting period and re- accordance with the requirements of M.G.L. c. 55.	1	
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	ox only)		
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to activity, of all persons acting under the authority or on behalf of this committee ir incurred any liabilities nor made any expenditures on my behalf during this report	ccordance with the requirements of M.G.L. c. 55. I have no		
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disbursem campaign finance activity of all persons acting under the authority or on behalf of	s, in-kind contributions and liabilities for this reporting per its candidate in accordance with the requirements of M.G.L.	iod and represents the	
Signed under the penalties of perjury:	(Candidate's signature)		

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.)

Name and Residential Address			Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
May 9, 2020	William Hayner 19 Putnam Rd. Arlington, MA 02474	100		
Mar 28, 2020	Pearl Morrison 14 Pawnee Dr. Arlington, MA 02474	100		
Mar 19, 2020	Carroll Edward Schwartz 20 Robin Hood Rd. Arlington, MA 02474	100		
Mar 15, 2020	Jennifer Susse 45 Teel St. Arlington, MA 02474	100	2020	
May 3, 2020	Robert L. Tosi, Jr. 14 Inverness Rd. Arlington, MA 02474	100	77 29 A	
May 26, 2020	Paul Schlichtman 47 Mystic St., Apt. 8C Arlington, MA 02474	5,800	Retired	
Line 9: Total Rece	ipts over \$50 (or listed above)	6,300		
Line 10: Total Receipts \$50 and under* (not listed above)		315		

^{*} 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)	Occupation & Employer (for contributions of \$200 or more)	
			7020
			22 9 5 7 P
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS 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.)				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Feb 24, 2020	Connolly Printing	17B Gill St. Woburn, MA 01801	Palm cards	870.19
May 11, 2020	Connolly Printing	17B Gill St. Woburn, MA 01801	Mailing and yard signs	3,522.44
May 18, 2020	Connolly Printing	17B Gill St. Woburn, MA 01801	Mailing	1,867.47
May 10, 2020	YourArlington.com	150 Washington St. Arlington, MA 02474	Online advertising	93

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,	d viscous and a second	Line 12: Total Expenditures ov	ver \$50 (or listed above)	6,353.1
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	40.57
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				6,393.57

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

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SCHEDULE B: EXPENDITURES (continued)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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	- NATIONAL - TO THE TRANSPORTED AND ADDRESS OF THE TRANSPORTED ADDRESS OF THE TRANSPORTED ADDRESS OF THE TRANSPORTED AND ADDRESS OF THE TRANSPORTED			
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line $4 \rightarrow$	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
			202 M	- - - - - - - - - -
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· · · · · · · · · · · · · · · · · · ·		Line 15: In-Kind Contributions	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	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.

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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., Apt. 8C Arlington, MA 02474	Loan to campaign	630
5/26/2020	Paul Schlichtman	47 Mystic St., Apt. 8C Arlington, MA 02474	Loan to campaign	5,800
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200				
			င်း	
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTA	NDING LIABILITIES (ALL)	6,430