

# Form CPF M 102: Campaign Finance Report

Municipal Form
TOWN CLERK'S OFFICE
Office of Campaign and Political Finance INGTON, MA 02174 2023 JAN 18 PM 12: U4
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Janua	uary 20, 2022 Ending Date: January 20, 2023				
Type of Report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election				
Jeffrey D. Thielman  Candidate Full Name (if applicable)  School Committee  Office Sought and District  37 Coolidge Road, Arlington, MA 02476  Residential Address  E-mail: jeff.thielman@gmail.com  Phone # (optional): (781) 859-9099	Committee to Elect Jeff Thielman  Committee Name  Christine Power Thielman  Name of Committee Treasurer  37 Coolidge Road, Arlington, MA 02476  Committee Mailing Address  E-mail:				
SUMMARY BALANC	CE INFORMATION:				
Line 1: Ending Balance from previous report	\$1,1822.67				
Line 2: Total receipts this period (page 3, line 11)	\$0.00				
Line 3: Subtotal (line 1 plus line 2)	\$1,822.67				
Line 4: Total expenditures this period (page 5, line	ne 14) \$0.00				
Line 5: Ending Balance (line 3 minus line 4) \$1,822.67					
Line 6: Total in-kind contributions this period (pa					
Line 7: Total (all) outstanding liabilities (page 7) \$0.00					
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: January 17, 2023					
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:	(Candidate's signature) Date: January 17, 2023				

#### 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)
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ine 9: Total Rece	ipts over \$50 (or listed above)		
ine 10: Total Reco	eipts \$50 and under* (not listed above)		
ine 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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)
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		THE PROPERTY OF THE PROPERTY O	
	ts over \$50 (or listed above)		
Line 10: Total Receip	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		Enter on page 1, line 2

<sup>\*</sup> 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.)

eport 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
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distribution				
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		Line 12: Total Expenditures ov	er \$50 (or listed above)	
Line 13: Total Expenditures \$50 and under* (not listed above)				
			(1.51 1.51 1.51 1.51 1.51 1.51 1.51 1.51	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

<sup>\*</sup> 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)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	MAPPER and the second s			
		Line 12: Expenditures over \$5	0 (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
		Zine 15. Experiencies \$50 and	under (not listed above)	<u></u>
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	

<sup>\*</sup> 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
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		Frankriting and the state of th		
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	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 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	1

<sup>\*</sup> 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	
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<u> </u>	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				

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