



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF CAMBRIDGE  
ELECTION COMMISSION

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2017 Ending Date: October 20, 2017 **2017 OCT 24 10:37**

Type of Report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

William MacArthur  
Candidate Full Name (if applicable)

Cambridge School Committee  
Office Sought and District

18 Shea Rd, Cambridge, MA 02140  
Residential Address

E-mail: williamhmacarthur@gmail.com

Phone # (optional): \_\_\_\_\_

Committee to Elect Will MacArthur  
Committee Name

Elizabeth Harkavy  
Name of Committee Treasurer

18 Shea Rd, Cambridge, MA 02140  
Committee Mailing Address

E-mail: elizabeth.harkavy@gmail.com

Phone # (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$1543.43
Line 2: Total receipts this period (page 3, line 11)	\$3660.50
Line 3: Subtotal (line 1 plus line 2)	\$5203.93
Line 4: Total expenditures this period (page 5, line 14)	\$2157.15
Line 5: Ending Balance (line 3 minus line 4)	\$3046.78
Line 6: Total in-kind contributions this period (page 6)	\$0
Line 7: Total (all) outstanding liabilities (page 7)	\$0
Line 8: Name of bank(s) used:	Eastern 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: [Signature] (Treasurer's signature) Date: 10/24/17

**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 or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/24/2017

## 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)
9/17/2017	Georges Atallah 192 Rindge Ave Cambridge, MA 02140	\$50	
9/18/2017	Jill Bent 36 Shea Rd Cambridge, MA 02140	\$25	
2/20/2017	Robert Binstock 157 Hamilton St Cambridge, MA 02139	\$50	
9/17/2017	John Corcoran 33 Kingston St Somerville, MA 02144	\$20	
4/4/2017	Chelsea Darwin 111 Inman St Cambridge, MA 02139	\$20	
9/24/2017	Karen Dempsey 16 Shea Rd Cambridge, MA 02140	\$50	
1/24/2017	Margot Dionne 6206 Wiscasset Rd Bethesda, MD 20816	\$150	
5/22/2017	Brett Flehinger 20 Harrison Ave Cambridge, MA 02140	\$100	
5/6/2017	Nancy Klemm Friedman 20 University Rd Cambridge, MA 02138	\$1000	Photographer Self-employed
5/6/2017	Shanti Fry 8 Berkeley St Cambridge, MA 02138	\$100	
5/13/2017	Esteban Gonzalez 945 N Leavitt St Apt 2N Chicago, IL 60622	\$50	
9/17/2017	Amy Green 15 Richdale Ave Apt 302 Cambridge, MA 02140	\$50	

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under\* (not listed above)

Line 11: **TOTAL 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 A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/4/2017	Alison Hickey 18 Shea Rd Cambridge, MA 02140	\$40	
9/24/2017	Adrienne Hickey 281 Garth Rd Apt C3F Scarsdale, NY 01583	\$50	
8/18/2017	Amanda Hughes 1195 North Avenue Apt 405 Burlington, VT 05408	\$25	
9/18/2017	Robert Hyde 112 Inman St Apt B Cambridge, MA 02139	\$100	
8/12/2017	Ethan Kahn 100 Craftsland Rd Brookline, MA 02467	\$10	
4/4/2017	Jonah Kane 21A Lancaster St Cambridge, MA 02140	\$20	
5/6/2017	Elizabeth Keating 122 Larch Rd Cambridge, MA 02138	\$500	Consultant Self-employed
5/2/2017	Kathryn Kuhar 0 Mower Hl Cambridge, MA 02138	\$45.50	
4/12/2017	Diego Lasarte 42 Kinnaird St Cambridge, MA 02139	\$20	
9/23/2017	Allison Lee 70 Grassland St Lexington, MA 02421	\$15	
7/4/2017	Michelle Li 432 Norfolk St Apt 2D Somerville, MA 02143	\$50	
10/6/2017	Katharine London 7A Meacham Rd Cambridge, MA 02140	\$25	
7/26/2017	William MacArthur 18 Shea Rd Cambridge, MA 02140	\$10	
Line 9: Total Receipts over \$50 (or listed above)		\$3610.50	<i>see attached addendum to schedule A</i> <i>Page 1: 1665.00</i> <i>Page 2: 910.50</i> <i>Addendum: 1085.00</i> ← Enter on page 1, line 2 $3660.50 + 50 = 3660.50$
Line 10: Total Receipts \$50 and under* (not listed above)		\$50	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>\$3660.50</b>	

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

Will MacArthur CPF M102 Schedule A Addendum for the January 1st, 2017-October 20th, 2017 Reporting Period

Date Recd	First Name	Last Name	Address	Apt	City	Stat	Zip	Amount	Occupation	Employer
10/6/2017	Judith	Marie	76 Harvard Ave		Brookline	MA	02446	\$25.00	Lawyer/Head of HR/Consultant	Multiple employers
4/12/2017	George	McAllister	12 Shea Rd		Cambridge	MA	02140	\$25.00		
7/3/2017	George	McAllister	12 Shea Rd		Cambridge	MA	02140	\$40.00	Retired	
7/30/2017	Isabel	Meyers	19 Garrison Rd	#3	Brookline	MA	02445	\$20.00		
1/27/2017	Gallieo	Mondol	71 Magazine St		Cambridge	MA	02139	\$20.00	Student	
7/8/2017	Kathleen	Moore	9 Doane St		Cambridge	MA	02138	\$20.00	Educational consultant	Self; Harvard
7/12/2017	Adriane	Musgrave	5 Newport Rd	#1	Cambridge	MA	02140	\$50.00	Candidate for City Council	Self-employed
7/16/2017	David	O'Connor	18 Bates St		Cambridge	MA	02140	\$200.00	<i>Executive Director</i>	<i>WHRE Consortium</i>
5/10/2017	Suzanne P	Ogden	20 Berkeley St		Cambridge	MA	02138	\$50.00		
9/23/2017	Elizabeth	Paden	6 Thénault Ct		Cambridge	MA	02140	\$50.00	City Planner	City of Cambridge
4/18/2017	Anne	Pinto	271 Dartmouth St	Apt 3H	Boston	MA	02116	\$20.00		
5/6/2017	Jean Ann	Ramsey	485 Mass Ave	Ste 2	Cambridge	MA	02139	\$50.00		
1/1/2017	Duncan	Rheingans-Yoo	9405 Mellenbrook Road		Columbia	MD	21045	\$50.00	Student	
9/3/2017	Victor	Rogers	1214 S. Washington St		Crawfordsville	IN	47933	\$10.00		
9/17/2017	Mary Margaret	Seagraves	286 Brookline St		Cambridge	MA	02139	\$25.00		
9/13/2017	Emma	Seevak	64 Linnaean St		Cambridge	MA	02138	\$20.00	Student	Harvard University
5/6/2017	Jo M	Solet	15 Berkeley St		Cambridge	MA	02138	\$100.00		
7/9/2017	Ariadne	Valsamis	212 Fayerweather St		Cambridge	MA	02138	\$50.00	Director of Development	Harvard Medical School
8/15/2017	Carolyn	Yao	2 Auburn Ct	#3	Brookline	MA	02446	\$10.00		
1/22/2017	Caryn	Zucker	32 E 64th Street	Apt 3W	New York	NY	10065	\$200.00	Stay-at-home mother	

## 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/12/2017	Cambridge Offset Printing	56 Creighton St Cambridge, MA 02140	100 campaign t-shirts	\$923.44
6/7/2017	William MacArthur	18 Shea Rd Cambridge, MA 02140	Reimbursement for Cambridge Offset Printing order N41462 (flyers and business cards)	\$661.03
10/2/2017	William MacArthur	18 Shea Rd Cambridge, MA 02140	Reimbursement for Cambridge Offset Printing order N42416 (signs and bumper stickers)	\$491.94
Line 12: Total Expenditures over \$50 (or listed above)				\$2076.41
Line 13: Total Expenditures \$50 and under* (not listed above)				\$80.74
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>\$2157.15</b>

\* 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 B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				

\* 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 6 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)				
<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				

Enter on page 1, line 6 →

\* 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.*

<b>Date Incurred</b>	<b>To Whom Due</b>	<b>Address</b>	<b>Purpose</b>	<b>Amount</b>
Enter on page 1, line 7 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				