



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2025 Ending Date: 10/17/25

Type of Report: (Check one)

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

Jessica Goetz

Candidate Full Name (if applicable)

School Committee - Cambridge

Office Sought and District

97 Pemberton St, Cambridge, MA 02140

Residential Address

E-mail: jess.goetz@gmail.com

Phone #: 413-212-1122

Jess Goetz for School Committee

Committee Name

Paul Stark

Name of Committee Treasurer

97 Pemberton St, Cambridge, MA 02140

Committee Mailing Address

E-mail: paulcstark@gmail.com

Phone #: 617-515-4928

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$0</u>
Line 2: Total receipts this period (page 3, line 12)	<u>\$1901.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$1901.00</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>1710.46</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>190.54</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>\$31.65</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u></u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u></u>
Line 9: Name of bank(s) used:	<u>Rockland Trust</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:

Paul Stark

(Treasurer's signature)

Date: 10/27/25

### 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:

Jess Goetz

(Candidate's signature)

Date: 10/27/25

## 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)
7/11/25	Paul Stark 97 Pemberton St Cambridge, MA 02140	\$25	Vice President, Phastar
7/16/25	Susan Stark 45 Stapleford Dr Falmouth, ME 04105	\$25	
7/24/25	Arjun Jaikumar 175 Richdale Ave Cambridge, MA 02140	\$46	
7/24/25	Melissa Page 170 Gore St, Apt 112 Cambridge, MA 02141	\$146	
7/24/25	Ashley Owens Wood 1 Wood St Cambridge, MA 02140	\$100	Therapist, self-employed
7/28/25	Paul Stark 97 Pemberton St Cambridge, MA 02140	\$50	Vice President, Phastar
7/30/25	Paul Stark 97 Pemberton St Cambridge, MA 02140	\$350	Vice President, Phastar
8/9/25	Rachel Kelsey 63 Mt. Vernon St, Apt 5 Cambridge, MA 02140	\$100	
8/10/25	Ashley Owens Wood 1 Wood St Cambridge, MA 02140	\$100	Therapist, self-employed
8/24/25	Katherine Greeley 200 Erie St Cambridge, MA 02140	\$100	
8/27/25	Rebecca Richman Cohen 10 Corporal McTernan St, #404 Cambridge, MA 02139	\$180	
9/9/25	Julie Bowden 272 Upland Road Cambridge, MA 02140	\$200	Author, self-employed

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/9/25	Andrea Eichman 84 Holworthy St Cambridge, MA 02138	\$100	
9/21/25	Nina Farouk 15 Robinson St Cambridge, MA 02138	\$150	
9/21/25	Rena Leib 10 Arnold Circle Cambridge, MA 02139	\$25	
9/25/25	Nicholas Horton 341 Prospect St Northampton, MA 01060	\$100	
9/25/25	Maritza Soto 82 Fresh Pond Parkway Cambridge, MA 02138	\$50	
10/16/25	Arjun Jaikumar 175 Richdale Ave Cambridge, MA 02140	\$54	
Line 10: Total Receipts over \$50 (or listed above)		\$1901	<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)			
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$1901	

← 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
7/30/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$10.22
8/4/25	Yard Signs Plus	10511 Kipp Way, Ste 430 Houston, TX 77099	Yard signs	\$221.40
8/5/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$0.88
8/5/25	Cedar Graphics Print Shop	311 Parsons Drive Hiawatha, IA 52233	Campaign literature	\$85.00
8/13/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$7.00
8/27/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$3.50
8/28/25	Signs on the Cheap	11525a Stone Hollow Dr, Suite 100 Austin, TX 78758	Campaign literature	\$80.88
9/3/25	Staples	160 Alewife Brook Parkway Cambridge, MA 02138	Campaign literature	\$176.35
9/4/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$6.30
9/8/25	Star Market	49 White St Cambridge, MA 02140	Refreshments for event	\$46.44
9/15/25	Staples	160 Alewife Brook Parkway Cambridge, MA 02138	Campaign literature	\$35.06
9/15/25	Ninja Transfers	2727 Commerce Way, Ste 100 Philadelphia, PA 19154	Campaign materials	\$65.28
9/17/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$10.50

Enter expenditure totals on Page 5

**SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/24/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$6.13
9/24/25	Print Runner	8000 Haskell Ave Van Nuys, CA 91406	Campaign literature	\$331.40
10/1/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$5.25
10/10/25	Calloway Graphics	361 Newbury St Boston, MA 02115	Campaign literature	\$616.98
10/16/25	Act Blue	PO Box 441146 Somerville, MA 02114	Processing fee	\$1.89
<i>* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.</i>			Line 13: Expenditures over \$50 (or listed above)	\$1710.46
Enter on page 1, line 4 →			Line 14: Expenditures \$50 and under (not listed above)	
			<b>Line 15: TOTAL EXPENDITURES IN THE PERIOD</b>	<b>\$1710.46</b>



## 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.*

[illegible]

*\* 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)	\$31.65
Line 17: In-Kind Contributions \$50 and under (not listed above)	
Line 18: <b>TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD</b>	\$31.65

## 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
<div style="display: flex; justify-content: space-between; align-items: center;"> <span>Enter on page 1, line 7 →</span> <span><b>Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)</b></span> </div>				