

**UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT**

FORM B

For use by candidates and new employees

Period covered: January 1, 2012 - Nov 1 2013

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LEGISLATIVE RESOURCE CENTER
2013 NOV 27 PM 1:44

Name: Richard R Tse

Daytime Telephone: _____

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Candidate for the House of Representatives	State: <u>MA</u> District: <u>6</u>	Date of Election: <u>Sept 9 2014</u>	Check if Amendment <input type="checkbox"/>	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
	<input type="checkbox"/> New officer or employee	Employing Office: _____			

In all sections, please type or print clearly in blue or black ink.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

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For additional assets and unearned income, use next page

Continuation Sheet (if needed)

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Continuation Sheet (if needed)

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Continuation Sheet (if needed)

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SCHEDULE III - LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred mo/year	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE	\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Spouse/DC Liability over \$10,000
JT	Salem 5 Bank, Salem MA	Dec 2007	Business line of credit for Homebased Bond Properties Inc					X						
JT	BOA VISA, Wilmington DE	Revolving	Business credit card for Homebased Bond Properties Inc		X									
SP	Discover, (and) Streamline	Mar 2013	Personal loan		X									
JT	Quicken Loans Servicing, Louisville KY	Feb 2013	Mortgage on Rental MA property located in Edgemoor					X						
JT	Watershed Coop Bank Watershed MA	Feb 2007	Mortgage on Rental Property located in Watershed MA				X							

SCHEDULE IV - POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature.

Position	Name of Organization
President	Homebased Bond Properties Inc
President	Nocturnal Associates Inc
Manager	26 Main Street LLC
Trustee	701 Main Street Trust
Trustee	Nocturnal Realty Trust

SCHEDULE III — LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred mo/year	Type of Liability	Amount of Liability										
				A \$10,001— \$15,000	B \$15,001— \$50,000	C \$50,001— \$100,000	D \$100,001— \$250,000	E \$250,001— \$500,000	F \$500,001— \$1,000,000	G \$1,000,001— \$5,000,000	H \$5,000,001— \$25,000,000	I \$25,000,001— \$50,000,000	J Over \$50,000,000	K Spouse/DC Liability over \$1,000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X							
JT	Eastern Bank Middleborough MA	May 2005	Mortgage on Unit A/C 26 Main Street Lynnfield MA						X					
JT	Eastern Bank Middleborough MA	May 2005	2nd Mortgage on Unit A/C 26 Main Street Lynnfield MA			X								
JT	Eastern Bank Middleborough MA	Mar 2008	Mortgage on Unit B 26 Main Street Lynnfield MA					X						
JT	BGA Ventures, Lynnfield MA	Mar 2008	2nd Mortgage on Unit B 26 Main Street Lynnfield MA			X								

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Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature.

Position	Name of Organization
Manager	Nocturnal Partners LLC
Trustee	Stoneham Theater
Corporator	Hallmark Health
Corporator	The Savings Bank

SCHEDULE V - AGREEMENTS

Name

Richard R. Tisei

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

DATE	Parties To	Terms of Agreement
Nested 1990	Richard R. Tisei & Commonwealth of MA	Pension that will provide a monthly benefit of a undeposited amount upon Retirement

SCHEDULE VI - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of individuals, companies of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a total amount of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship; compensation for the use of your name; and any information listed on Schedule I.

Source (Name and Address)	Accounting services	Brief Description of Duties
Remix Nam Street Associates Hawthorn MA	Real Estate Services	
Coverell Barten Residential Brokerage Andover MA	Real Estate Services	
Colwell Barten Residential Brokerage Lynn MA	Real Estate Services	
C21 Spaulding O'Brien, Boston Reading MA	Real Estate Services	