

OCT 06 2026

LEGISLATIVE RESOURCE CENTER

2026 OCT -8 PM 1:40

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVESUNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE REPORT

FORM B

For New Members, Candidates, and New Employees

Name <u>Paul A. L. S. C.</u>		Daytime Telephone <u>5</u>	
FILER STATUS	☒ New Member Candidate	<u>ME</u>	☐ Chief of Staff
	☐ U.S. House Representative	<u>02</u>	☐ Chief of Staff
	☐ Candidate	<u>02</u>	☐ Chief of Staff
☐ New Officer	Employed	Full Time (If Applicable)	Part Time
☐ Employee of Office	Served	Principal Assistant	Other

(Office Use Only)

CC

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A Did you personally deposit or contribute more than \$1000 in contributions during the reporting period?	Yes ☒ No ☐	E Did you have any reportable political contributions during the reporting period?	Yes ☐ No ☒
B Received more than \$200 in contributions from any reportable source during the reporting period?	Yes ☒ No ☐	F Did you have more than one reportable political contribution during the reporting period?	Yes ☐ No ☒
C Did you have more than one reportable political contribution during the reporting period?	Yes ☒ No ☐	G Did you receive more than one reportable political contribution during the reporting period?	Yes ☒ No ☐
D Did you or your spouse or dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes ☒ No ☐	H Did you receive more than one reportable political contribution during the reporting period?	Yes ☒ No ☐

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER YES

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE DEPENDENT OR TRUST INFORMATION ANSWER BOTH OF THESE QUESTIONS

TRUSTS - Detail of all gifts and bequests received by the Committee on Ethics during the reporting period.	Yes ☐ No ☒
EXEMPTION - Have you or your spouse or dependent child been exempted from the reporting requirements of this Act?	Yes ☐ No ☒

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Name PAUL R. LEFAR	Page 2 of 2
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Name PAUL R. Lefrancis

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[illegible]

Name

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SCHEDULE E – POSITIONS

[illegible]

SCHEDULE F - AGREEMENTS

Name _____	Page _____ of _____
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Identify the date parties to a disagreement terms of any agreement arrangement in which you have the potential future employment relationship based on the period of your service contract or date of payment by a former current employer the United States government continuing participation in employee life or benefit plan maintained by a former employer

Date	Parties to Agreement	Terms of Agreement

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

Report the compensation received by you based on the full time service provided by you during the calendar year. This includes the compensation of any corporate partnership the business relationship if you directly provided the service generally if you received more than \$5 000 in excess of payments by the U.S. government and any information considered confidential is it a privileged relationship recognized by law. Do not report the information listed in Schedule C.

Source (Name and City/State)	Brief Description of Duties
Example Doe J & Smith Home town State	Accounting Services

SCHEDULE A - ASSETS & UNEARNED INCOME

Name _____

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Assets	Value	Type of Income	Amount	
			Current Year	Previous Year
1. Real Estate (such as rental property, vacation home, etc.)		Rental Income		
2. Stocks and Bonds		Dividend Income		
3. Mutual Funds		Dividend Income		
4. Other Investments		Dividend Income		
5. Partnerships		Partnership Income		
6. Trusts		Trust Income		
7. Other Assets		Other Income		
8. Total				