



2022 PAC & BQC Biennial Registration Updates

Instructions

TYPE OF COMMITTEES

General. Under the Type of Committee section, the committee must determine which type of campaign it is primarily going to direct its activity towards (candidate or referenda). All PACs will primarily be focused on candidate elections and all BQCs will primarily be focused on referenda elections. PACs and BQCs are permitted to influence the opposite campaign type (e.g. PACs may influence referenda campaigns) up to \$10,000.

PAC Types. There are four PAC Types for a PAC to choose from: Traditional, Separate/Segregated Fund, Caucus, and Leadership. A Caucus PAC is established by a political party in one of the chambers of the Legislature (e.g. House Democrats or Senate Republicans). A Leadership PAC is a PAC that is directly or indirectly established, maintained, and/or controlled by a current member of the Legislature. If a PAC has a current member of the Legislature as an officer and the PAC is not a Caucus PAC, then the PAC must be listed as a Leadership PAC.

If the PAC does not meet the definitions of Caucus or Leadership PAC and the PAC does not have a founding organization (e.g. voluntary association, partnership, sole proprietorship) then the PAC type is Traditional.

If the PAC does not meet the definitions of Caucus or Leadership PAC and the PAC has a founding organization, then the PAC may choose between a Separate/Segregated Fund or Traditional PAC. Starting on January 1, 2023, Separate/Segregated Fund PACs may not accept contributions from business entities (this includes both for-profit and non-profit entities, labor unions, and other membership organizations). Please contact the Maine Ethics Commission for more information.

BQC Types. Unlike PACs, BQCs may be formed by a single, individual person. If the BQC has been formed by an individual then the BQC type is Individual; otherwise, the BQC type is Traditional.

PRIMARY FUNDRAISERS & DECISION MAKERS

Decision Makers. Each committee (except for an Individual BQC), must have at least two officers, a Treasurer and Principal Officer. If there are other people who have decision making authority over the committee, then they must be disclosed. (The best way to view Decision Makers is that the Principal Officer is the chief decision maker but there may be other people who have decision making authority.)

Fundraiser. A fundraiser is a person who is primarily responsible for raising contributions for the committee. A fundraiser will often also be listed as a Decision Maker.

CAMPAIGN ACCOUNT INFORMATION

All committees must establish/maintain a bank account with a financial institution. All funds that are received or spent for the purpose of influencing a campaign must be deposited and spent from that account (there is no prohibition on reimbursing volunteers/officers from the account). The funds in this account may not be commingled with the general treasury of the founding organization or personal funds of any individual. A committee may request that this requirement be waived because it would be administratively burdensome.

ACKNOWLEDGMENT FORMS

Please complete and return the Acknowledgment Forms for each officer, even if the Acknowledgments were previously submitted.



2022 PAC & BQC Biennial Registration Updates

Forms

Pursuant to 21-A M.R.S. § 1052-A(1)(C), all political action committees (PACs) and ballot question committees (BQCs) are required to file an updated registration between January 1st and March 1st of each year in which a general election is held. Due to significant changes in the law, the Commission is enlarging the time period to complete this biannual registration. All PACs and BQCs that have filed their initial registration prior to October 18, 2021 are **required** submit their Biannual Registration Updates using this form. A PAC or BQC that fails to submit this completed form to the Maine Ethics Commission by 11:59 P.M. on March 1, 2022 is noncompliant and may be subject to financial penalties.

COMMITTEE INFORMATION		
Committee Name		Acronym (Optional)
Mailing Address		Phone
City	State	Zip
Committee Email		Alternate Email 1 (Optional)
Alternate Email 2 (Optional)		Web Address (Optional)
TYPE OF COMMITTEE (Please see Instruction Page)		
(Select One)		
<input type="checkbox"/> The primary purpose of this Committee is to influence candidate campaigns. (PACs) <input type="checkbox"/> The primary purpose of this Committee is to influence referenda campaigns. (BQCs)		
For PACs Only (Select One)		
<input type="checkbox"/> Separate/Segregated Fund PAC <input type="checkbox"/> Leadership PAC <input type="checkbox"/> Caucus PAC <input type="checkbox"/> Traditional PAC		
For BQCs Only (Select One)		
<input type="checkbox"/> Individual BQC <input type="checkbox"/> Traditional BQC		
TREASURER INFORMATION		
The information on the registration is correct. <input type="checkbox"/> (If checked, skip this section)		
Last Name	First Name	Current Legislator Yes <input type="checkbox"/> No <input type="checkbox"/>
Mailing Address		Phone
City	State	Zip
Email		Fax (Optional)

PRINCIPAL OFFICER INFORMATION

The information on the registration is correct. (If checked, skip this section)

Last Name	First	Current Legislator Yes <input type="checkbox"/> No <input type="checkbox"/>
Mailing Address		Phone
City	State	Zip
Email		Fax (Optional)

AUTHORIZED AGENT INFORMATION (OPTIONAL)

The information on the registration is correct. (If checked, skip this section)

Last Name	First Name
Email	Phone
Last Name	First Name
Email	Phone

PRIMARY FUNDRAISERS & DECISION MAKERS INFORMATION

The information on the registration is correct. (If checked, skip this section)

Last Name	First Name		
Email			
Role (Check all that apply)	Decision Maker <input type="checkbox"/>	Fundraiser <input type="checkbox"/>	Legislator <input type="checkbox"/>
Last Name	First Name		
Email			
Role (Check all that apply)	Decision Maker <input type="checkbox"/>	Fundraiser <input type="checkbox"/>	Legislator <input type="checkbox"/>
Last Name	First Name		
Email			
Role (Check all that apply)	Decision Maker <input type="checkbox"/>	Fundraiser <input type="checkbox"/>	Legislator <input type="checkbox"/>
Last Name	First Name		
Email			
Role (Check all that apply)	Decision Maker <input type="checkbox"/>	Fundraiser <input type="checkbox"/>	Legislator <input type="checkbox"/>

FORM OF ORGANIZATION

Role (Select One)

- Corporation Cooperative Limited Liability Co. Non-Profit
 Unregistered Partnership Voluntary Association Individual Other _____

Date of Origin or Incorporation

FOUNDING ORGANIZATIONS

(Skip if Form of Organization is a: Unregistered Partnership, Voluntary Association, or Individual)

Name of Business/Organization

Phone

Address

City

State

Zip

Name of Business/Organization

Phone

Address

City

State

Zip

Name of Business/Organization

Phone

Address

City

State

Zip

CAMPAIGN ACCOUNT INFORMATION

Name on Account

Name of Financial Institution

Mailing Address

City

State

Zip

Certification
(Select One)

- I certify that the funds deposited into the Campaign Account are segregated from the general treasury funds of a founding organization and that the funds are not commingled with the funds of any individual person.
- I request a waiver of the requirement to maintain a separate account because the requirement is administratively burdensome.

STATEMENT OF COMMITTEE PURPOSE

Indicate the specific candidate(s) or referenda that the committee will be supporting or opposing. If the purpose is non-specific, indicate the categories of candidates or types of issues that the Committee will be supporting or opposing. (e.g. "This Committee supports John Smith for Governor," "This Committee opposes the People's Veto of LD XXX," "This Committee opposes candidates who want to increase taxes.")

Support

Oppose _____

CERTIFICATION

(Select One)

I certify that this PAC/BQC is not directly or indirectly established, maintained, or controlled, by a current member of the legislature.

I certify that I have listed the member(s) of the legislature who are directly or indirectly establishing, maintaining, or controlling this PAC/BQC as a Principal Officer, Treasurer, Decision Maker, or Fundraiser.

SIGNATURE OF OFFICER

FULL NAME

TITLE

SIGNATURE

DATE



Acknowledgment of Responsibilities – Treasurer

For Political Action Committees & Ballot Question Committees

OFFICER INFORMATION		
Last Name	First	Committee Name
Mailing Address		Phone
City	State	Zip
Email		Fax (Optional)
OFFICER RESPONSIBILITIES		
<p>1. I am jointly responsible with the principal officer for ensuring that the committee complies with the requirements of Maine Election Law (21-A M.R.S., chapter 13) applicable to the committee. These requirements include but are not limited to:</p> <ul style="list-style-type: none"> • filing complete and accurate reports as required by the Commission; • keeping all required records of contributions, expenditures and bank statements for the committee's campaign account; and • updating the committee's registration information within 10 days of any change, including the resignation or removal of the principal officer or a decision-maker and filing an updated registration with the Commission by March 1st of every year in which there is a general election. <p>2. I am jointly and severally liable with the principal officer and the committee for any penalties assessed against the committee for violations of Maine Election Law (21-A M.R.S., chapters 13 and 14).</p> <p>3. I am deemed to have participated in any spending decisions of the committee until the Commission has received notice of my resignation or involuntary removal from the committee.</p> <p>4. I am responsible for notifying the Commission and the committee's principal officer in writing if I resign from the position of treasurer and that my resignation will not be effective until the Commission receives such notice.</p> <p>5. I am responsible for notifying the Commission if the principal officer or a decision-maker is involuntarily removed from the committee.</p>		
ACKNOWLEDGMENT		
I have read this acknowledgment and understand my responsibilities and liabilities as Treasurer.		
Signature _____		Date _____



Acknowledgment of Responsibilities – Principal Officer

For Political Action Committees & Ballot Question Committees

OFFICER INFORMATION		
Last Name	First	Committee Name
Mailing Address		Phone
City	State	Zip
Email		Fax (Optional)
OFFICER RESPONSIBILITIES		
<p>1. I am jointly responsible with the treasurer for ensuring that the committee complies with the requirements of Maine Election Law (21-A M.R.S., chapter 13) applicable to the committee. These requirements include but are not limited to:</p> <ul style="list-style-type: none"> • filing complete and accurate reports as required by the Commission; • ensuring that the treasurer of the committee keeps all required records of contributions, expenditures and bank statements for the committee’s campaign account; and • updating the committee’s registration information within 10 days of any change, including the resignation or removal of the treasurer or a decision-maker and filing an updated registration with the Commission by March 1st of every year in which there is a general election. <p>2. I am jointly and severally liable with the treasurer and the committee for any penalties assessed against the committee for violations of Maine Election Law (21-A M.R.S., chapters 13 and 14).</p> <p>3. I am deemed to have participated in any spending decisions of the committee until the Commission has received notice of my resignation or involuntary removal from the committee.</p> <p>4. I am responsible for notifying the Commission and the committee’s treasurer in writing if I resign from the position of principal officer and that my resignation will not be effective until the Commission receives such notice.</p> <p>5. I am responsible for notifying the Commission if the treasurer or a decision-maker is involuntarily removed from the committee.</p>		
ACKNOWLEDGMENT		
I have read this acknowledgment and understand my responsibilities and liabilities as Principal Officer.		
Signature		Date



Commission on Governmental Ethics and Election Practices
Mail: 135 State House Station, Augusta, Maine 04333
Office: 45 Memorial Circle, Augusta ME, 04333

Website: www.maine.gov/ethics
Phone: 207-287-4179
Fax: 207-287-6775

Acknowledgment of Responsibilities – Decision Maker

For Political Action Committees & Ballot Question Committees

OFFICER INFORMATION		
Last Name	First Name	Committee Name
Email		Phone
OFFICER RESPONSIBILITIES		
<ol style="list-style-type: none">1. I am deemed to have participated in any spending decisions of the committee until the Commission has received notice of my resignation or involuntary removal from the committee.2. I am responsible for notifying the Commission and the committee in writing if I resign from the position of decision-maker and that my resignation will not be effective until the Commission receives such notice.		
ACKNOWLEDGMENT		
I have read this acknowledgment and understand my responsibilities and liabilities as a Decision Maker.		
Signature		Date

Failure to submit this Acknowledgment of Responsibilities form may result in a fine of \$100