

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

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## 2023 ELECTION 24-HOUR REPORT OF CONTRIBUTIONS AND EXPENDITURES

For Political Action Committees, Ballot Question Committees, and State Party Committees

COMMITTEE INFORMATION			
Name of committee		Phone	
Mailing address, city, state, ZIP code			
TREASURER INFORMATION			
Name of treasurer		Phone	
Mailing address, city, state, ZIP code			
FILING SCHEDULE FOR 2023 ELECTIONS			
Election	Election Date	Reporting Period	
General Election	November 7, 2023	October 25 - November 6, 2023	
WHEN TO FILE	WHAT CONTRIBUTIONS SHOULD BE REPORTED	WHAT EXPENDITURES SHOULD BE REPORTED	
Within 24 hours, including weekends and holidays, of receiving the contribution or making the expenditure, incurring the obligation, or placing the order. Reports must be filed with the Clerk's office. If the Committee is also registered with the Commission then the report must also be filed with the Commission.	more received during the reporting period.	Any <u>single</u> expenditure of \$1,000 or more made during the reporting period. Orders placed with or obligations made to vendors for goods or services are considered expenditures at the time the orders or obligations are made. Overhead costs, such as rent, taxes, utilities and some salary payments are not required to be reported.	

## **IMPORTANT REMINDERS**

The information contained in this report must also be included on the appropriate schedule of the next regularly scheduled campaign finance report. If an expenditure is disclosed in an independent expenditure report, it is not necessary to file a separate 24-hour report for the same expenditure.

CONTRIBUTIONS OF \$5,000 OR MORE			
Contributor Name		Date of contribution	
Address		Amount of contribution	
City, state, ZIP code			
Occupation	Employer		
Contributor Name		Date of contribution	
Address		Amount of contribution	
City, state, ZIP code		I	
Occupation	Employer		
EXPENDITURES O	F \$1,000 OR MO	PRE	
Payee/Creditor		Date of expenditure	
Address		Amount of expenditure	
City, state, ZIP code			
Purpose of expenditure			
Expenditure made on behalf of (name of candidate or ballot questi	on)	In support or opposition?	
Payee/Creditor		Date of expenditure	
Address		Amount of expenditure	
City, state, ZIP code			
Purpose of expenditure			
Expenditure made on behalf of (name of candidate or ballot question	on)	In support or opposition?	
I,, certify that the info	ormation in this repor	t is true, correct and complete.	
Signature of Treasurer_	Date_		