

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

2023 CAMPAIGN FINANCE REPORT

FOR ALL POLITICAL ACTION COMMITTEES, BALLOT QUESTION COMMITTEES, & STATE PARTY COMMITTEES

Pleas	e complete ALL en	ries.				
	NAME OF COMMITTEE					
	STREET					□ CHECK IF CHANGED
CIT	Y AND ZIP CODE			TELEPHONE NUMBER		FROM PREVIOUS REPORT
	E-MAIL					
	NAME OF TREASURER					
MA	ILING ADDRESS STREET					□ CHECK IF CHANGED
CIT	Y AND ZIP CODE			TELEPHONE NUMBER		FROM PREVIOUS REPORT
	E-MAIL					
	Type of R	<u>eport</u>	<u>Due Date</u>		Dates of Report Period	<u>k</u>
	Initial PAC Report		Seven (7) days after Registration	Start of Year - date of registration		ation
	Initial BQC Report		Seven (7) days after Registration	Start o	Start of Campaign – date of registration	
	April Quarterly Rep	oort	April 10, 2023		January 1 – March 31, 2023	
	July Quarterly Rep	ort	July 17, 2023	April 1 – June 30, 2023		
	42-Day Pre-Election	n Report	September 26, 2023	July 1 – September 19, 2023		23
	11-Day Pre-Election	n Report	October 27, 2023	Se	ptember 20 – October 24,	2023
	January Quarterly	Report	January 16, 2024	Oc	tober 25 – December 31,	2023
	Amendment to:					
			ommittee had no contributions and r iod. Check the appropriate report ab		and did not incur any un	paid debts or
	Termination Repor	t: If the committee	will have no further activity. Check	the appropriate	e report above as well.	
	ERTIFY THAT I HAND COMPLETE.	AVE EXAMINED	THIS REPORT AND TO THE BES	ST OF MY KNO	WLEDGE IT IS TRUE, O	CORRECT,
	Treasure	er's or Principal	Officer's Signature)ate

PAC/BQC Name:	Page of
	Schedule A only

SCHEDULE A CASH CONTRIBUTIONS

- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For cash contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor separately.
- Duplicate as needed.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT	
Total cash contributions (this page only) ⇒ (combined totals from all Schedule A pages must be listed on Schedule F					

Key Codes:

5 = Political Action Committee

1 = Individuals 7 = Ballot Question Committee

3 = Commercial Source 9 = Candidate/Candidate Committees

4 = Non Profit Organization 10 = General Treasury Transfer

12 = Contributors giving \$50 or Less

6 = Political Party Committee 16 = Financial Institution

AC/BQC Name:	Page of
	Schedule A-1 only

SCHEDULE A-1 IN-KIND CONTRIBUTIONS

- In-kind contributions are goods and services (including facilities) that a committee received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the committee by others if the committee does not expect to reimburse the person who made the purchase.
- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor separately.
- Duplicate as needed.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	DESCRIPTION (of goods, services, facilities, or discounts received)	TYPE (use key code)	VALUE (estimated fair market value)
Total in-kind contributions (this page only) ⇒ (combined totals from all Schedule A-1 pages must be listed on Schedule F)					

Key Codes:

5 = Political Action Committee

6 = Political Party Committee

1 = Individuals 7 = Ballot Question Committee

3 = Commercial Source 9 = Candidate/Candidate Committees

4 = Non Profit Organization 10 = General Treasury Transfer

12 = Contributors giving \$50 or Less

16 = Financial Institution

PAC/BQC Name:	Page of
	Schedule B only

SCHEDULE B EXPENDITURES TO SUPPORT OR OPPOSE

- Enter all expenditures, including cash contributions from this committee, made to support or oppose a candidate, political action committee, ballot question committee, or party committee.
- Enter all expenditures made to support or oppose a ballot question, referendum, or citizen initiative, including expenditures made in the signature-gathering phase.
- Enter the name of the candidate, ballot question, or committee supported or opposed by the expenditure and indicate whether the expenditure was made in support or opposition.
- Duplicate as needed.

If a single expenditure is made to support or oppose multiple candidates, committees, or ballot questions, the expenditure must be itemized by the amount spent per candidate, committee, or ballot question, not as a single expenditure, and each candidate, committee, or ballot question must be identified.

		EXPENDITU	IDE T	VDES		
		EXPENDITO	JKE I	IPES		
APP	Apparel (t-shirts, hats, embroidery, etc.)			Personnel and campaign staff, consulting, and independent contractors		
CON	Contrib	ution to party committee, non-profit, other	PHO	Phones (phone banking, robocalls, and texts)		
EQP	Equipm	nent of \$50 or more (computer, tablet, phone, furniture, etc.)	POL	Polling and survey research		
EVT	Campa supplies	ign and fundraising events (venue/booth rental, entertainment, s, etc.)	POS	Postage for US Mail and mailbox fees		
FOD	Food fo	or campaign events or volunteers, catering	PRO	Professional services (graphic design, legal s	services, web design)	
HRD	Hardwa	are and small tools (hammer, nails, lumber, paint, etc.)	RAD	Radio ads and production costs only		
LIT	Printed	campaign materials (palmcards, signs, stickers, flyers etc.)	TKT	Entrance cost to event (bean suppers, fairs, p	party events, etc.)	
MHS	Mail ho	use and direct mail (design, printing, mailing, and postage)	TRV	Travel (mileage and lodging, etc.)		
OFF	Office s	supplies, rent, utilities, internet service, phone minutes/data	TVN	TV/Cable ads, production, and media buyer of	costs only	
ONL	Social r	medial and online advertising only	WEB	Website and internet costs (website domain a	and registration, etc.)	
ОТН	Other a	and fees (bank, contribution, and money order fees, etc.)				
		! REMARKS REQUIRED ON A	ALL EXP	ENDITURE TYPES!		
Date:		Payee Name and Address:			Amount	
Туре:		Remarks (Required):				
турс.		rtemants (rtequirea).				
∐ Sup	pport	Candidate Name/Ballot Question:				
	pose					
_ Ор	pose					
Date:		Payee Name and Address:			Amount	
Type:		Remarks (Required):				
•		· · ·				
		Candidate Name/Ballot Question:				
∟ Sup	pport	Candidate Iname/Danot Question.				
☐ Opp	pose					
	=					
		Total e	expen	ditures this page only ⇒		
(combined totals from all Schedule B pages must be listed on Schedule F)						
		•	. •	•		

PAC/BQC Name:

Page	of
Schedul	e B only

SCHEDULE B (continued) EXPENDITURES TO SUPPORT OR OPPOSE

Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
Туре:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
		7
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Oppose	Total avacaditures this ness cally ->	
	Total expenditures this page only ⇒ (combined totals from all Schedule B pages	
	must be listed on Schedule F)	

PAC/BQC	C Nam	ne:				of
		sc	HEDL	JLE B		ule B-1 only
		OPER				
fo in	or bank the re	operational expenditures made to a single payer of fees and vehicle travel may be aggregated and demark section.	ee or cre	ditor that	t were made during this reporting period. N	
• D	uplica	te as needed	NDITI	URE T	YPFS	
	T	EXI E				
APP	Appar	rel (t-shirts, hats, embroidery, etc.)		PER	Personnel and campaign staff, consulting, and independent	ndent contractors
CON	Contri	bution to party committee, non-profit, other		PHO	Phones (phone banking, robocalls, and texts)	
EQP		ment of \$50 or more (computer, tablet, phone, furniture, etc.)		POL	Polling and survey research	
EVT		aign and fundraising events (venue/booth rental, entertainme es, etc.)	ent,	POS	Postage for US Mail and mailbox fees	
FOD	Food	for campaign events or volunteers, catering		PRO	Professional services (graphic design, legal services,	web design)
HRD	Hardv	vare and small tools (hammer, nails, lumber, paint, etc.)		RAD	Radio ads and production costs only	
LIT	Printe	d campaign materials (palmcards, signs, stickers, flyers etc.)		TKT	Entrance cost to event (bean suppers, fairs, party ever	nts, etc.)
MHS	Mail h	ouse and direct mail (design, printing, mailing, and postage)		TRV	Travel (mileage and lodging, etc.)	
OFF	Office	supplies, rent, utilities, internet service, phone minutes/data		TVN	TV/Cable ads, production, and media buyer costs only	
ONL	Socia	l medial and online advertising only		WEB	Website and internet costs (website domain and regist	tration, etc.)
ОТН	Other	and fees (bank, contribution, and money order fees, etc.)				
		! REMARKS REQUIR	RED FOR	ALL EXP	ENDITURE TYPES !.	
DATE		PAYEE NAME & ADDRESS	ТҮРЕ		REMARKS (REQUIRED)	AMOUNT

Total expenditures (this page only) \Rightarrow

(combined totals from all Schedule B-1 pages must be listed on Schedule F)

DAC/DOC Name:	
PAC/BQC Name:	

Page _	of	
Sched	ule B-1	only

SCHEDULE B – 1 (continued) OPERATING EXPENSES

DATE	PAYEE NAME & ADDRESS	TYPE	REMARKS (REQUIRED)	AMOUNT
Total expenditures (this page only) ⇒				
(combined totals from all Schedule B-1 pages must be listed on Schedule F)				

PAC/BQC Name:	Page of
	Schedule C onl

SCHEDULE C LOANS AND REPAYMENTS

• List all new and continuing loans that were unpaid at any time during this reporting period. If a loan amount is forgiven, the amount forgiven **must** also be entered as a contribution on Schedule A.

Duplicate as needed.

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
	LOAN BALANCE	ACTIVITY THIS PERIOD (report amount and date)		LOAN BALANCE AT	
LENDER'S NAME AND ADDRESS	AT BEGINNING OF PERIOD	AMOUNT LOANED THIS PERIOD	AMOUNT REPAID THIS PERIOD	AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also)	END OF PERIOD (1+2) – 3 – 4
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
Totals for each column ⇒		Enter on Schedule F, Line 3	Enter on Schedule F, Line 7		Enter on Schedule F, Line 14

PAC/BQC Nam			of ule D only	
 A debt or obligation is incurred if a committee places an order for a good or service without making a payment; makes a promise or agreement to pay for a good or service; signs a contract for a good or service; or receives delivery of a good or service for which the committee has not paid. This schedule is a list of all unpaid debts and obligations of the committee as of the end of this reporting period. When the obligation has been paid, the expenditure (i.e., the actual payment) must be reported on Schedule B or B-1. If the committee has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section. If obligations from a previous campaign finance report still remain unpaid, you will need to continue to report them on this schedule until they have been paid in full. Duplicate as needed. 				
DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT	

Total unpaid debts and obligations (this page only) \Rightarrow

(combined totals from all Schedule D pages must be listed on Schedule F)

SCHEDULE F SUMMARY SCHEDULE

CASH ACTIVITY

Receipts	Total for this Period
1. Cash Contributions (Schedule A)	
2. Other Cash Receipts (interest, etc.)	
3. Loans (Schedule C)	
4. Total Receipts (lines 1 + 2 + 3)	
Expenditures	Total for this Period
Experialitates	Total for tills I criou
Expenditures to Support or Oppose (Schedule B)	Total for this Foriou
•	
5. Expenditures to Support or Oppose (Schedule B)	
5. Expenditures to Support or Oppose (Schedule B)6. Operating Expenditures (Schedule B-1)	

CASH SUMMARY

	Total for This Period
9. Cash Balance at Beginning of Period	
10. Plus Total Receipts This Period (line 4 above)	
11. Minus Total Payments This Period (line 8 above)	
12. Cash Balance at End of Period	

OTHER ACTIVITY

	Total for This Period
13. In-Kind Contributions (Schedule A-1)	
14. Total Loan Balance at End of Period (Schedule C)	
15. Total Unpaid Debts at End of Period (Schedule D)	