

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 CAMPAIGN FINANCE REPORT

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

Please complete ALL ent	ries.				
NAME OF COMMITTEE					
					- CHECK
STREET					IF CHANGED
CITY AND ZIP CODE			TELEPHONE NUMBER		FROM PREVIOUS REPORT
E-MAIL					
NAME OF TREASURER					
MAILING ADDRESS STREET					□ CHECK IF CHANGED
CITY AND ZIP CODE			TELEPHONE NUMBER		FROM PREVIOUS REPORT
E-MAIL					I ILLI OILI
Type of R	<u>eport</u>	<u>Due Date</u>		Dates of Report Period	<u> </u>
☐ Initial PAC Report		Seven (7) days after Registration	Sta	rt of Year - date of registra	ation
☐ Initial BQC Report		Seven (7) days after Registration	Start o	of Campaign – date of regi	stration
☐ April Quarterly Rep	ort	April 10, 2023		January 1 – March 31, 202	3
☐ July Quarterly Rep	ort	July 17, 2023		April 1 - June 30, 2023	
☐ October Quarterly I	Report	October 5, 2023	•	July 1 – September 30, 202	23
☐ 11-Day Pre-Election	n Report	October 27, 2023	C	October 1 – October 24, 20	23
☐ 42-Day Post-Election	n Report	December 19, 2023	Ос	tober 25 – December 12, 2	2023
☐ January Quarterly I	Report	January 16, 2024	Dec	ember 13 – December 31,	2023
☐ Amendment to:					
		ommittee had no contributions and r riod. Check the appropriate report ab		and did not incur any unp	oaid debts or
☐ Termination Repor	t: If the committe	e will have no further activity. Check	the appropriate	e report above as well.	
I CERTIFY THAT I HAT AND COMPLETE.	AVE EXAMINED	THIS REPORT AND TO THE BES	ST OF MY KNO	WLEDGE IT IS TRUE, C	ORRECT,
Treasure	er's or Principal	Officer's Signature		n	ate

PAC/BQC Name:	 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:

1 = Individuals 7 = Ballot Question Committee

3 = Commercial Source 9 = Candidate/Candidate Committees

4 = Non Profit Organization 10 = General Treasury Transfer

5 = Political Action Committee 12 = Contributors giving \$50 or Less

6 = Political Party Committee 16 = Financial Institution

PAC/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:

1 = Individuals 7 = Ballot Question Committee

3 = Commercial Source 9 = Candidate/Candidate Committees

4 = Non Profit Organization 10 = General Treasury Transfer

5 = Political Action Committee 12 = Contributors giving \$50 or Less

16 = Financial Institution

6 = Political Party Committee

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.

'	•				
		EXPENDIT	JRE T	YPES	
APP	Apparel (t-shirts, hats, embroidery, etc.)			Personnel and campaign staff, consulting, an	d independent contractors
CON	Contribution to party committee, non-profit, other			Phones (phone banking, robocalls, and texts)	
EQP	Equipm	nent of \$50 or more (computer, tablet, phone, furniture, etc.)	POL	Polling and survey research	
EVT	Campai 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	ervices, 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	ALL EXF	PENDITURE TYPES!	
Date:		Payee Name and Address:			Amount
Type:		Remarks (Required):			
.) [(, , , , , , , , , , , , , , , , , , ,			
∐ Sup	oport	Candidate Name/Ballot Question:			
	pose				
					^
Date:		Payee Name and Address:			Amount
Type:		Remarks (Required):			
☐ Sur	oport	Candidate Name/Ballot Question:			
☐ Opp	Oppose				
	Total expenditures this page only ⇒				
(combined totals from all Schedule B pages must be listed on Schedule F)					

Page	of
Schedule	B only

SCHEDULE B (continued) EXPENDITURES TO SUPPORT OR OPPOSE

	(combined totals from all Schedule B pages must be listed on Schedule F)	
11	Total expenditures this page only ⇒	
☐ Oppose		
☐ Support	Candidate Name/Ballot Question:	1
71 .		
Type:	Remarks (Required):	_
Date:	Payee Name and Address:	Amount
☐ Oppose		
☐ Support	Candidate Name/Ballot Question:	1
· 76	· · · · · · · · · · · · · · · · · · ·	
Type:	Remarks (Required):	_
Date:	Payee Name and Address:	Amount
☐ Oppose		
☐ Support	Candidate Name/Ballot Question:	1
Type:	nemana (nequileu).	
Typo:	Remarks (Required):	1
Date:	Payee Name and Address:	Amount
☐ Oppose		
☐ Support	Candidate Name/Ballot Question:	
ı ype.		
Type:	Remarks (Required):	
Date:	Payee Name and Address:	Amount
☐ Oppose		
☐ Support	Candidate Name/Ballot Question:	
Type:	Remarks (Required):	
Date:	Payee Name and Address:	Amount

PAC/BQ0	C Nam	ne:				of
			HEDU		-1	ule B-1 only
fo in	or bank n the re	OPERA operational expenditures made to a single payer of fees and vehicle travel may be aggregated and emark section. te as needed	ee or cred	ditor that	were made during this reporting period. N	
• 0	ирпса		NDITU	JRE T	YPES	
APP	Appar	rel (t-shirts, hats, embroidery, etc.)		PER	Personnel and campaign staff, consulting, and indepen	ndent contractors
CON	Contri	bution to party committee, non-profit, other		PHO	Phones (phone banking, robocalls, and texts)	
EQP	Equip	ment of \$50 or more (computer, tablet, phone, furniture, etc.)		POL	Polling and survey research	
EVT		aign and fundraising events (venue/booth rental, entertainmees, etc.)	ent,	POS	Postage for US Mail and mailbox fees	
FOD	1	for campaign events or volunteers, catering		PRO	Professional services (graphic design, legal services, v	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	Social	I medial and online advertising only	WEB Website and internet costs (website domain and registration, etc.)		tration, etc.)	
ОТН	Other	and fees (bank, contribution, and money order fees, etc.)				
		! REMARKS REQUIF	RED FOR	ALL EXP	ENDITURE TYPES !.	
DATE	I	PAYEE NAME & ADDRESS	TY	PE	REMARKS (REQUIRED)	AMOUNT

Total expenditures (this page only) ⇒

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

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 only

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.

Duplicate as needed.		T	Ī	1	!
	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
	LENDER'S NAME AND ADDRESS LOAN BALANCE AT BEGINNING OF PERIOD	ACTIVITY THIS PERIOD (report amount and date)			LOAN BALANCE AT
		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 Name:	Page of
	Schedule D only
Ş	CHEDULE D
UNPAID DE	BTS AND OBLIGATIONS

- 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) ⇒			

PAC/BQC Name:		

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
5. Expenditures to Support or Oppose (Schedule B)	
6. Operating Expenditures (Schedule B-1)	
7. Loan Repayment (Schedule C)	
8. Total Payments (lines 5 + 6 + 7)	

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)	