



2020 CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Commission.

Is this an amendment? Yes No

1. CANDIDATE INFORMATION		
Are you running as a (check one): <input type="checkbox"/> Maine Clean Election Act candidate <input type="checkbox"/> traditionally financed candidate		
Title <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Honorable	Party affiliation	Office sought & District #
Name: First	MI or Middle Name	Last
County (for candidates for county office)		
Mailing address		Phone
City	Zip code	Alternate Phone
E-mail (required)		Fax

2. TREASURER INFORMATION		
Name: First	MI or Middle Name	Last
Phone		
Mailing address		Fax
City	Zip code	E-mail (required)

DESIGNATION OF TREASURER: A candidate for office must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Commission the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. A MCEA candidate may serve as treasurer for no more than 14 days following the date of registration. (21-A MRSA §§ 1013-A and 1125(12-A))

2A. DEPUTY TREASURER INFORMATION (optional)		
Name: First	MI or Middle Name	Last
Phone		
Mailing address		Fax
City	Zip code	E-mail (required)

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer and notify the Commission no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. A MCEA candidate may serve as deputy treasurer for no more than 14 days following the date of registration. (21-A MRSA §§ 1013-A and 1125(12-A)) (21-A MRSA § 1013-A (1)(A)(1))

3. AUTHORIZED AGENT INFORMATION (optional)		
Name	Phone	Email (required)
Name	Phone	Email (required)

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name	Phone	
Address of campaign headquarters	City	Zip code

DESIGNATION OF POLITICAL COMMITTEE (optional): The candidate may form a political or campaign committee. Within 10 days of forming the committee and before accepting contributions, making expenditures or incurring obligations, the candidate must:

- appoint a treasurer (the candidate may have only one treasurer who is listed in Section 2) and
- register the committee and its officers, if any are appointed, with the Commission. (21-A MRSA § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name	Title	Phone
Mailing address	City	Zip code
		E-mail

Name	Title	Phone
Mailing address	City	Zip code
		E-mail

5. CERTIFICATION	
I, _____, certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate _____	Date _____

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates and legislative candidates in an uncontested primary election may request an exemption.	
A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for his or her campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Commission.	
STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of candidate _____	Date _____
Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____.	
Signature of Notary/Attorney-at-law _____ (Seal is optional)	My commission expires _____ (Date)
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Commission no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	