



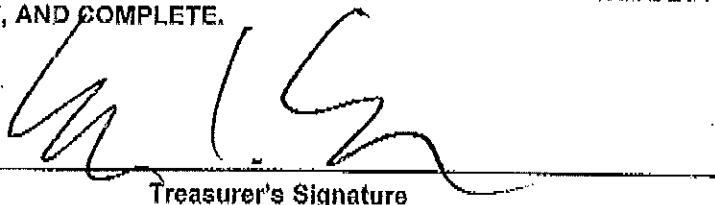
## 2015 HD 19 SPECIAL ELECTION CAMPAIGN FINANCE REPORT

FOR PARTICIPATING POLITICAL ACTION COMMITTEES AND STATE AND LOCAL POLITICAL PARTY COMMITTEES  
 Please complete ALL entries.

|                        |                                |                  |              |  |
|------------------------|--------------------------------|------------------|--------------|--|
| NAME OF COMMITTEE      | Maine Democratic Party         |                  |              | <input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT |
| STREET                 | 320 Water Street               |                  |              |  |
| CITY AND ZIP CODE      | Augusta, ME 04330              | TELEPHONE NUMBER | 207-590-0259 |  |
| E-MAIL                 | scanchristophersmith@gmail.com |                  |              |  |
| NAME OF TREASURER      | Betty Johnson                  |                  |              | <input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT |
| MAILING ADDRESS STREET | P.O. Box 5258                  |                  |              |  |
| CITY AND ZIP CODE      | Augusta, ME 04332              | TELEPHONE NUMBER | 207-622-7432 |  |
| E-MAIL                 | exec@mainedem.org              |                  |              |  |

| Type of Report   | Due Date          | Dates of Report Period              |
|--|-------------------|-------------------------------------|
| <input checked="" type="checkbox"/> 11-Day Pre-Election  | October 23, 2015  | August 11, 2015 — October 20, 2015  |
| <input type="checkbox"/> 42-Day Post-General   | December 15, 2015 | October 21, 2015 — December 8, 2015 |
| <input type="checkbox"/> Amendment to: _____   |                   |                                     |
| <input type="checkbox"/> No Activity Report: Use only if the committee had no contributions and no expenditures and did not incur any unpaid debts or obligations during the reporting period. Check the appropriate report above as well. |                   |                                     |

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE, CORRECT, AND COMPLETE.

  
 Treasurer's Signature

10/23/15  
 Date

## 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 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.

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

| EXPENDITURE TYPES |  |     |   |
|-------------------|--|-----|---|
| CON               | Contribution to candidate, party or committee                    | POL | Polling and survey research                               |
| CNS               | Campaign consultants   | POS | Postage for U.S. Mail and mail box fees                   |
| EQP               | Equipment (office machines, furniture, cell phones)              | PRO | Professional services                                     |
| FND               | Fundraising events   | PRT | Print media ads only (newspapers, magazines, etc.)        |
| FOD               | Food for campaign events, volunteers                             | RAD | Radio ads, production costs                               |
| LIT               | Printing and graphics (flyers, signs, palmcards, t-shirts, etc.) | SAL | Campaign workers' salaries and personnel costs            |
| MHS               | Mail house (all services purchased)                              | TRV | Travel (fuel, mileage, lodging, etc.)                     |
| OFF               | Office rent, utilities, phone and internet services, supplies    | TVN | TV or cable ads, production costs                         |
| OTH               | Other  | WEB | Website design, registration, hosting, maintenance, etc.) |
| PHO               | Phone banks, automated telephone calls                           |     |   |

*Remark required for All expenditures types!*

| DATE     | PAYEE'S NAME AND ADDRESS  | REMARKS (REQUIRED) | TYPE | AMOUNT  |
|----------|---|--------------------|------|---------|
| 10/1/15  | LDZ Consulting, 400<br>Commercial St. Portland, ME<br>04101   | Mail               | MHS  | 1196.50 |
|          | Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/> :<br>Jean Niss |                    |      |         |
| 10/15/15 | LDZ Consulting, 400<br>Commercial St. Portland, ME  | Mail               | MHS  | 1833.47 |
|          | Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/> :<br>Jean Niss |                    |      |         |
|          |   |                    |      |         |
|          | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :                         |                    |      |         |
|          |   |                    |      |         |
|          | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :                         |                    |      |         |

**Total expenditures this page only =>**  
*(combined totals from all Schedule B pages must be listed on Schedule F)*

3029.47

PAC/PTY 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) |  | 3029.97               |
| 6. Operating Expenditures (Schedule B-1)          |  |                       |
| 7. Loan Repayment (Schedule C)                    |  |                       |
| 8. Total Payments (lines 5 + 6 + 7)               |  | 3029.97               |

**CASH SUMMARY**

| Total for This Period                               |           |
|---|-----------|
| 9. Cash Balance at Beginning of Period              | 0         |
| 10. Plus Total Receipts This Period (line 4 above)  |           |
| 11. Minus Total Payments This Period (line 8 above) | 3029.97   |
| 12. Cash Balance at End of Period                   | - 3029.97 |

**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) |  |