



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES  
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## 2015 HD 19 SPECIAL ELECTION CAMPAIGN FINANCE REPORT

### FOR PARTICIPATING POLITICAL ACTION COMMITTEES AND STATE AND LOCAL POLITICAL PARTY COMMITTEES

Please complete ALL entries.

<b>NAME OF COMMITTEE</b>	MAINE REPUBLICAN PARTY			<input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT
<b>STREET</b>	9 HIGGINS STREET			
<b>CITY AND ZIP CODE</b>	AUGUSTA, 04330	<b>TELEPHONE NUMBER</b>	(207) 622-6247	
<b>E-MAIL</b>	CONTACT@MAINEGOP.COM			
<b>NAME OF TREASURER</b>	BENJAMIN LOMBARD			<input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT
<b>MAILING ADDRESS STREET</b>	9 HIGGINS STREET			
<b>CITY AND ZIP CODE</b>	AUGUSTA, 04330	<b>TELEPHONE NUMBER</b>	(207) 622-6247	
<b>E-MAIL</b>	BEN@MAINEGOP.COM			

<u>Type of Report</u>	<u>Due Date</u>	<u>Dates of Report Period</u>
<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

10/24/15

Date

**SCHEDULE A — CASH CONTRIBUTIONS**

- For contributors who gave more than \$50 to PACs or more than \$200 to political party committees, 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 to PACs or \$200 or less to political party committees, 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 or \$200, as applicable in a report period, you must list that contributor separately.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
<b>Total cash contributions (this page only) ⇒</b> <i>(combined totals from all Schedule A pages must be listed on Schedule F)</i>				NONE

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/\$200 or Less |
| 6 = Political Party Committee  | 16 = Financial Institution                  |

**SCHEDULE A (continued)  
CASH CONTRIBUTIONS**

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
<p align="right"><b>Total cash contributions (this page only) ⇒</b> <i>(combined totals from all Schedule A pages must be listed on Schedule F)</i></p>				<p align="center">NONE</p>

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/\$200 or Less |
| 6 = Political Party Committee  | 16 = Financial Institution                  |

**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 to PACs or more than \$200 to political party committees, 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 to PACs or \$200 or less to political party committees, 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 or \$200, as applicable, in a report period, you must list that contributor separately.

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)
<b>Total in-kind contributions (this page only) =&gt;</b> <i>(combined totals from all Schedule A-1 pages must be listed on Schedule F)</i>					NONE

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/\$200 or Less |
| 6 = Political Party Committee  | 16 = Financial Institution                  |

## 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 expenditure types !**

DATE	PAYEE'S NAME AND ADDRESS	REMARKS (REQUIRED)	TYPE	AMOUNT
10/08/15	CREATIVE IMAGING GROUP PO BOX 6540 SCARBOROUGH ME 04070		MHS	\$942.05
	Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/> : MATT HARRINGTON			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
<b>Total expenditures this page only ⇒</b>				\$942.05
<b>(combined totals from all Schedule B pages must be listed on Schedule F)</b>				

**SCHEDULE B (continued)**  
**EXPENDITURES TO SUPPORT OR OPPOSE**

DATE	PAYEE'S NAME AND ADDRESS	REMARKS (REQUIRED)	TYPE	AMOUNT
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
<b>Total expenditures this page only ⇒</b> <i>(combined totals from all Schedule B pages must be listed on Schedule F)</i>				NONE

## SCHEDULE B - 1 OPERATING EXPENSES

List all operational expenditures made to a single payee or creditor that were made during this reporting period. Multiple expenditures for bank fees and vehicle travel may be aggregated and listed as a lump sum provided that the time period of the expenditure be identified in the remark section.

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

DATE	PAYEE NAME & ADDRESS	TYPE	REMARKS (REQUIRED)	AMOUNT
<b>Total expenditures (this page only) ⇒</b> <i>(combined totals from all Schedule B-1 pages must be listed on Schedule F)</i>				NONE

**SCHEDULE B-1 (continued)  
OPERATING EXPENDITURES**

DATE	PAYEE NAME & ADDRESS	TYPE	REMARKS (REQUIRED)	AMOUNT
<b>Total expenditures (this page only) ⇒</b> <i>(combined totals from all Schedule B-1 pages must be listed on Schedule F)</i>				NONE

Duplicate as needed.



### 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.

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
<b>LENDER'S NAME AND ADDRESS</b>	<b>LOAN BALANCE AT BEGINNING OF PERIOD</b>	<b>ACTIVITY THIS PERIOD (report amount and date)</b>			<b>LOAN BALANCE AT END OF PERIOD (1+2) - 3 - 4</b>
		<b>AMOUNT LOANED THIS PERIOD</b>	<b>AMOUNT REPAYD THIS PERIOD</b>	<b>AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also)</b>	
		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	
<b>Totals for each column ⇒</b>		Enter on Schedule F, Line 3  NONE	Enter on Schedule F, Line 7  NONE	NONE	Enter on Schedule F, Line 14  NONE

**SCHEDULE D  
UNPAID DEBTS 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.**

DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT
<b>Total unpaid debts and obligations (this page only) ⇒</b> <i>(combined totals from all Schedule D pages must be listed on Schedule F)</i>			NONE

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)	NONE
Expenditures	Total for this Period
5. Expenditures to Support or Oppose (Schedule B)	\$942.05
6. Operating Expenditures (Schedule B-1)	
7. Loan Repayment (Schedule C)	
8. Total Payments (lines 5 + 6 + 7)	\$942.05

**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)	NONE
14. Total Loan Balance at End of Period (Schedule C)	NONE
15. Total Unpaid Debts at End of Period (Schedule D)	NONE