

## SPECIAL ELECTION IN HOUSE DISTRICT 83

Is this an amendment?  Yes No

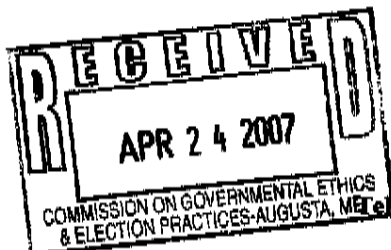
## STATE OF MAINE

Commission on Governmental Ethics and Election Practices

Mail: 135 State House Station, Augusta, Maine 04333

Office: 242 State Street, Augusta, Maine 04333

(207) 287-4179 Fax: (207) 287-6775 Web: www.maine.gov/ethics



## REGISTRATION: PRIVATELY FINANCED CANDIDATES, TREASURERS, POLITICAL COMMITTEES

Notice: Any change of information on this registration form must be filed within 10 days of the change.  
Changes may be submitted using this form or by e-mail.

1. CANDIDATE INFORMATION		
Name of candidate <i>Penelope A Morrell</i>	Party affiliation <i>Republican</i>	Office sought (include Dist. #) <b>House District #83</b>
Mailing address <i>864 Manchester Rd</i>	Phone (home) <i>495-3550</i>	Phone (work) <i>782-0101</i>
City, zip code <i>Belgrade 04917</i>	E-mail <i>pennyanne@qui.net</i>	Fax <i>782-0221</i>

2. TREASURER INFORMATION		
Name of treasurer <i>John Fortier</i>	Phone (home) <i>495-2467</i>	
Mailing address <i>19 Tallwood Circle</i>	Phone (work) <i>873-1101</i>	
City, zip code <i>Belgrade 04917-4611</i>	E-mail	Fax

**DESIGNATION OF TREASURER:** A candidate for state or county office must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. THE CANDIDATE MAY SERVE AS TREASURER. No later than 10 days after appointing the 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 filing reports. (21-A MRSA Section 1013-A)

3. DEPUTY TREASURER INFORMATION		
Name of deputy treasurer	Phone (home)	
Mailing address	Phone (work)	
City, zip code	E-mail	

**DESIGNATION OF DEPUTY TREASURER (optional):** The candidate may appoint a deputy treasurer, who must be reported to 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. (21-A MRSA Section 1013-A (1) (A) (1))

4. POLITICAL COMMITTEE INFORMATION	
Name of committee	Phone
Address of campaign headquarters	City, zip code

**DESIGNATION OF POLITICAL COMMITTEE (optional):** A candidate may authorize one political committee to promote the candidate's election. The candidate must appoint a committee treasurer no later than 10 days after appointing the committee, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a political committee, the candidate must register the name of the committee, the committee treasurer and officers. (21-A MRSA Section 1013-A (1) (B))

**Committee Treasurer:**

Name of committee treasurer		Phone
Mailing address	City, zip code	E-mail

**Committee Officers (use additional pages, if necessary):**

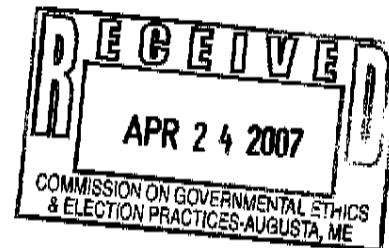
Name	Title	Phone
Mailing address	City, zip code	E-mail

<b>5. CERTIFICATION</b> (Must be signed even if exemption below is claimed)	
I, <u>Penelope A. Morrell</u> , certify that the information in this registration is true, correct and complete. (Print Candidate's Full Name)	
Signature of Candidate <u>Penelope A. Morrell</u>	Date <u>4/23/07</u>

<b>6. EXEMPTION FROM REPORTING REQUIREMENTS</b>	
<p>A reporting exemption relieves the candidate of the obligation to appoint a treasurer and file campaign finance reports. To obtain an exemption, the candidate must notify the Commission in a sworn and notarized statement that he/she will not accept contributions (including in-kind), make expenditures or incur financial obligations associated with the candidate's candidacy. <b>PLEASE NOTE:</b> personal funds of the candidate used for campaign purposes are considered campaign contributions/expenditures under Maine law. Hence, a candidate who uses such funds to support his/her candidacy is not eligible for a reporting exemption.</p> <p><b>NOTICE OF ELIGIBILITY FOR A REPORTING EXEMPTION:</b> I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy for the office of _____.</p> <p>Signature of candidate _____ Date _____</p> <p>Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____.</p> <p style="text-align: right;">Signature of Maine notary public _____ Notary Public, State of Maine</p> <p>Seal (optional) _____ My commission expires (date) _____</p> <p><b>REVOCATION NOTICE:</b> 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.</p>	



STATE OF MAINE  
 COMMISSION ON GOVERNMENTAL ETHICS  
 AND ELECTION PRACTICES  
 135 STATE HOUSE STATION  
 AUGUSTA, MAINE  
 04333-0135



**2007 SPECIAL ELECTION: STATEMENT CONCERNING VOLUNTARY  
 EXPENDITURE LIMITS  
 (PRIVATELY FINANCED LEGISLATIVE CANDIDATES ONLY)**

The Election Law requires all traditionally financed legislative candidates to confirm whether they agree to the following voluntary expenditure limits:

For State Representative, \$5,000 per election.

The expenditure limit covers all expenditures for the special election.

**THE ELECTION LAW REQUIRES YOU TO INDICATE WHETHER YOU AGREE TO  
 THE VOLUNTARY SPENDING LIMITS. PLEASE CHECK ONE BOX BELOW.**

I UNDERSTAND AND ACCEPT THE VOLUNTARY SPENDING LIMIT ON POLITICAL EXPENDITURES. I UNDERSTAND THAT THE LIMIT COVERS THE SUM OF ALL EXPENDITURES MADE TO INFLUENCE A SINGLE ELECTION THAT ARE MADE BY ME, OR MADE ON MY BEHALF BY MY PARTY OR MY IMMEDIATE FAMILY IF COORDINATED WITH MY CAMPAIGN. I ALSO AFFIRM THAT I WILL NOT CONDONE AND WILL NOT SOLICIT ANY INDEPENDENT EXPENDITURES MADE ON MY BEHALF.

I DO NOT AGREE TO THE VOLUNTARY SPENDING LIMITS ON POLITICAL EXPENDITURES.

4/23/07

Date Signed

Penelope A. Marshall

Candidate's Signature

WWW.MAINE.GOV/ETHICS

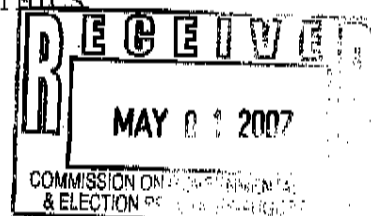
PHONE: (207) 287-4179  
 FAX: (207) 287-6775

OFFICE LOCATED AT: 242 STATE STREET, AUGUSTA MAINE

(Rev. 04/07)



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**MAINE CODE OF FAIR CAMPAIGN PRACTICES**  
**21-A M.R.S.A. §1101(2)**

I shall conduct my campaign and, to the extent reasonably possible, insist that my supporters conduct themselves, in a manner consistent with the best Maine and American traditions, discussing the issues and presenting my record and policies with sincerity and candor.

I shall uphold the right of every qualified voter to free and equal participation in the election process.

I shall not participate in and I shall condemn defamation of and other attacks on any opposing candidate or party that I do not believe to be truthful, provable and relevant to my campaign.

I shall not use or authorize and I shall condemn material relating to my campaign that falsifies, misrepresents or distorts the facts, including, but not limited to, malicious or unfounded accusations creating or exploiting doubts as to the morality, patriotism or motivations of any party or candidate.

I shall not appeal to and I shall condemn appeals to prejudices based on race, creed, sex or national origin.

I shall not practice and I shall condemn practices that tend to corrupt or undermine the system of free election or that hamper or prevent the free expression of the will of the voters.

I shall promptly and publicly repudiate the support of any individual or group that resorts, on behalf of my candidacy or in opposition to that of an opponent, to methods in violation of the letter or spirit of this code.

I, the undersigned candidate for election to public office in the State of Maine, hereby voluntarily endorse, subscribe to and solemnly pledge to conduct my campaign in accordance with the above principles and practices.

Penelope A. Morrell  
 Signature of Candidate

4/29/07  
 Date

Penelope A. Morrell  
 Printed Name

H.D. #83  
 Office Sought