

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES Mail: 135 State House Station, Augusta, Maine 04333

Office: 45 Memorial Circle, Augusta, Maine

Website: www.maine.gov/ethics Phone: 207-287-4179

Fax: 207-287-6775

### 2017 HD 56 SPECIAL ELECTION CAMPAIGN FINANCE REPORT

#### FOR POLITICAL ACTION COMMITTEES

Please complete ALL entries.

NAME OF COMMITTEE					
STREET					☐ CHECK 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					
Type of R	<u>eport</u>	Due Date		Dates of Report Period	
☐ 11-Day Pre-Elect	tion	October 27, 2017	Septe	ember 15, 2017 — Octobe	er 24, 2017
☐ 42-Day Post-Ele	ction	December 19, 2017	017 October 24, 2017 — December 12, 2017		12, 2017
☐ Amendment to:					
		ommittee had no contribut he reporting period. Check			
☐ Termination Rep	oort: If the committee	e will have no further activi	ty. Check the	appropriate report abo	ve as well.
		S REPORT AND TO THE B	EST OF MY KN	NOWLEDGE IT IS TRUE	,
CORRECT, AND CO	MPLEIE.				
	Treasurer's Signa	ature		Date	9/2017

Page	of	
Sche	dule 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.

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)			nly) ⇒ nedule F)	

Key Codes:

1 = Individuals

3 = Commercial Source

4 = Non Profit Organization

5 = Political Action Committee

6 = Political Party Committee

7 = Ballot Question Committee

9 = Candidate/Candidate Committees

10 = General Treasury Transfer

12 = Contributors giving \$50 or Less

16 = Financial Institution

Page	of
Sche	dule A Only

## SCHEDULE A (continued) CASH CONTRIBUTIONS

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)			nly) ⇒ edule 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

Page _	of
	dule 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.

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

6 = Political Party Committee 16 = Financial Institution

Page _	of
Sch	edule 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.

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.

EXPENDITURE TYPES					
CON	Contri	bution to candidate, party or committee	POL	Polling and survey research	
CNS	Campaign consultants			Postage for U.S. Mail and mail box fees	
EQP	·	ment (office machines, furniture, cell phones)	PRO	Professional services	
FND		aising events	PRT	Print media ads only (newspapers, ma	agazines, etc.)
FOD	Food	for campaign events, volunteers	RAD	Radio ads, production costs	
LIT	Printir	ng and graphics (flyers, signs, palmcards, t-shirts, etc.)	SAL	Campaign workers' salaries and personnel costs	
MHS	Mail h	ouse (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	
отн	Other		WEB	Website design, registration, hosting, i	maintenance, etc.)
РНО	Phone	e banks, automated telephone calls			
		! REMARKS REQUIRED ON	ALL EXF	PENDITURE TYPES!	
Date:		Payee Name and Address:			Amount
Type:	Type: Remarks (Required):				
Support Candidate Name/Ballot Question:					
Date: Payee Name and Address:		Amount			
Date. Payee N		r ayee Name and Address.			Amount
Type:	Type: Remarks (Required):				
Type. Temarks (required).					
		One distante Name (Pallet Occapion)			
☐ Su	Support Candidate Name/Ballot Question:				
□ Ор	☐ Oppose				
Total expenditures this page only ⇒					
		(combined totals from all Schedule			

PAC Name:	
710 Harrie.	

Page	of
Sche	edule B Only

# SCHEDULE B (continued) EXPENDITURES TO SUPPORT OR OPPOSE

Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
☐ Oppose		
Date:	Payee Name and Address:	Amount
24.0.		
Type:	Remarks (Required):	
☐ Support	Candidate Name/Ballot Question:	
Oppose  Date:	Payee Name and Address:	Amount
Date.	Fayee Name and Address.	Amount
Type:	Remarks (Required):	
,,	· · ·	
	Candidate Name/Ballot Question:	
☐ Support	Candidate Hamo Banot Question.	
☐ Oppose		
	Total expenditures this page only ⇒	
	(combined totals from all Schedule B pages must be listed on Schedule F)	

Page	of _	
Schedule	B-1	Only

## 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.

expen	diture b	e identified in the remark section.				
		EXPE	ENDITU	JRE TY	PES	
CON	Contrib	oution to candidate, party or committee		POL	Polling and survey research	
CNS	Campa	ign consultants		POS	Postage for U.S. Mail and mail box fees	
EQP	Equipm	nent (office machines, furniture, cell phones)		PRO	Professional services	
FND	Fundra	ising events		PRT	Print media ads only (newspapers, magazine	s, etc.)
FOD	Food fo	or campaign events, volunteers		RAD	Radio ads, production costs	
LIT	Printing	g and graphics (flyers, signs, palmcards, t-shirts, et	c.)	SAL	Campaign workers' salaries and personnel costs	
MHS	Mail ho	ouse (all services purchased)		TRV	Travel (fuel, mileage, lodging, etc.)	
OFF	Office r	rent, utilities, phone and internet services, supplies		TVN	TV or cable ads, production costs	
отн	Other			WEB	Website design, registration, hosting, mainte	nance, etc.)
РНО	Phone	banks, automated telephone calls				
		! REMARKS REQUIRI	ED FOR	ALL EXI	PENDITURE TYPES !.	
DA	TE	PAYEE NAME & ADDRESS	TY	Έ	REMARKS (REQUIRED)	AMOUNT
		(nombined totals from a	II Caba		I expenditures (this page only) ⇒ pages must be listed on Schedule F)	

Page	of _	
Schedule	B-1	Only

# SCHEDULE B-1 (continued) OPERATING EXPENDITURES

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)				

Page _	of
Sch	edule 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.

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
	LOAN BALANCE AT BEGINNING OF PERIOD	ACTIVITY THIS PERIOD (report amount and date)			LOAN BALANCE AT
LENDER'S NAME AND ADDRESS		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	
Totals for each column ⇒		Enter on Schedule F, Line 3	Enter on Schedule F, Line 7		Enter on Schedule F, Line 14

Page _	of
Sch	edule D Only

## 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
Total unpaid debts and obligations (this page only) ⇒ (combined totals from all Schedule D pages must be listed on Schedule F)			

PAC Name:	
-----------	--

### SCHEDULE F SUMMARY SCHEDULE

### **CASH ACTIVITY**

Receipts	Total for this Period
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)	Total for this Period
	Total for this Period
5. Expenditures to Support or Oppose (Schedule B)	Total for this Period
Expenditures to Support or Oppose (Schedule B)     Operating Expenditures (Schedule B-1)	Total for this Period

#### **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)	