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March 28, 2016 Maine Ethics Commission

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

24-HOUR REPORT OF CONTRIBUTIONS AND EXPENDITURES

For Political Action Committees, Ballot Question Committees and Political Party Committees

COMMITTEE INFORMATION				
Name of Committee:		Phone:		
Senate Democrat	ts Special Election Fund	1 207-622-6233		
Senate Democrats Special Election Fund 207-622-6233 Malling Address (City, State, Zip Code): PD Box 2207 Augusta ME 04338				
TREASURER INFORMATION				
Name of Treasurer: J. Will McCartney Mailing Address (City, State, Zip Code):		Phone: 207-622-6233		
Mailing Address (City, State, Zip Code): PO Box 22 07 Augusta ME 04338				
	FILING SCHEDULE FOR 2016			
Election	Election Date	Reporting Period		
Primary Election	June 14, 2016	June 1 — June 13, 2016		
- General Election	November 8, 2016	October 26 — November 7, 2016		
WHEN TO FILE	WHAT CONTRIBETIONS SHOULD:	WHAT EXPENDITURES SHOULD		
Within 24 hours, including Saturdays and Sundays, of receiving the contribution or making the expenditure, incurring the obligation, or placing the order. Reports can be filed via the committee's electronic filing website.	Any <u>single</u> contribution of \$5,000 or more received during the reporting period.	Any single expenditure of \$1,000 or more made during the reporting period. Orders placed with or obligations made to vendors for goods or services are considered expenditures at the time the orders or obligations are made. Overhead costs, such as rent, taxes, utilities and some salary payments are not required to be reported.		
IMPORTANT REMINDERS				

The information contained in this report must also be included on the appropriate schedule of the next regularly scheduled campaign finance report.

If an expenditure is disclosed in an independent expenditure report, it is not necessary to file a separate 24-hour report for the same expenditure.

CONTRIBUTIONS	F\$5,000 OR M	ORE	
Contributor Name:	enales des son est ances escensimananana.	Date of Contribution:	JERO (KEEPELES), 1 → PO → Community (Andrés), R
Address:		Amount of Contribution	n: ·
	•	\$	
City, State, Zip Code:	***************************************		
Occupation:	Employer:	AND	
Contributor Name:		Date of Contribution:	
Address:		Amount of Contribution:	
	•	\$	
City, State, Zip Code :	~~~	<u></u>	
Occupation: ,	Employer:		VII. 1 II.
EXPENDITURES O	E ET ANAVA DIMA		HAZEBSAROTAF SBIOTERIO (ARI
Address: Den are Democratic Cam,	origh Ummitte	Amount of Expenditure	0/6
POBOX2207		\$ 4,100	
City, State, Zip Code: Augustu ME 04338			
Purpose of Expenditure: Political Action Committee Expenditure made on behalf of (name of candidate or ballot question)	Transfer		
Expenditure made on behalf of (name of candidate or ballot question	on):	Support	[] Onnos
Susan Deschambault		kay Support	☐ Oppose
Payee/Creditor:		Date of Expenditure:	oonasyani-aliyiidaa dha yak Pelepeledik experimenti
Address:		Amount of Expenditure	Ţ.
City, State, Zip Code:		1.	
Purpose of Expenditure:			
Expenditure made on behalf of (name of candidate or ballot question	n):	☐ Support	☐ Oppose
I, J. Will McCartney true, correct and complete.	, certify that t	he information in thi	s report is

Signature of Treasurer