



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

2015 HD 23 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	207-590-0159	
E-MAIL	Seanchristophersmith@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@mainedems.org			

Type of Report	Due Date	Dates of Report Period
<input type="checkbox"/> 11-Day Pre-Election	October 23, 2015	August 27, 2015 — October 20, 2015
<input checked="" 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.

Sean C. Smith

Treasurer's Signature

12/15/15

Date

08/18

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
10/22/15	CDZ Consulting, 406 (Commercial) Street, Portland, ME 04101	Mail	MHS	1875.80
	Payment to support <input checked="" 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"/> :			
Total expenditures this page only =>				1875.80
<i>(combined totals from all Schedule B pages must be listed on Schedule F)</i>				

Duplicate as needed.

08/16

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)	1875.80
6. Operating Expenditures (Schedule B-1)	
7. Loan Repayment (Schedule C)	
8. Total Payments (lines 5 + 6 + 7)	1875.80

CASH SUMMARY

	Total for This Period
9. Cash Balance at Beginning of Period	- 2884.50
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	- 4760.30

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)	

Duplicate as needed.

08/15