

2009 Special Election



RECEIVED

MAR 16 2009

MAINE ETHICS COMMISSION

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES
Mail: 135 State House Station, Augusta, Maine 04333
Office: 242 State Street, Augusta, Maine

Website: www.maine.gov/ethics
Phone: 207-287-4179
Fax: 207-287-6775

**2009 CAMPAIGN FINANCE REPORT – HOUSE DISTRICT 89 SPECIAL ELECTION
POLITICAL ACTION COMMITTEES**

COMMITTEE IDENTIFICATION Check if address is different than previously reported.

Name House Democratic Campaign Committee
(full name of committee)
Mailing address PO Box 2001
(official headquarters of committee)
City, zip code AUGUSTA, ME 04338 Telephone 207-622-1912

TREASURER IDENTIFICATION Check if treasurer or address is different than previously reported.

Name of treasurer Steve Van Vogt
Mailing address PO Box 15087
City, zip code Powtucket, ME 04112 Telephone 207-828-1414
E-mail address SVanVogt@VeritasConsulting.com

POLITICAL ACTION COMMITTEE FILING PERIODS (Check applicable period below):

- | | Report Type | Due Date | Reporting Period |
|-------------------------------------|---|------------------|------------------------------------|
| <input type="checkbox"/> | 11-Day Pre-Primary | January 23, 2009 | January 6, 2009 – January 20, 2009 |
| <input checked="" type="checkbox"/> | 42-Day Post-Primary | March 17, 2009 | January 21, 2009 – March 10, 2009 |
| <input type="checkbox"/> | Check this box if this report is an amendment to a previously filed report. | | |

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE, IT IS TRUE, CORRECT AND COMPLETE.

Treasurer's Signature

3/16/09

Date

HACC
Name of PAC

PURPOSE OF COMMITTEE
(Complete each category that applies for this reporting period.)

Name of candidate(s) supported	Party affiliation	Office sought
Dennis Haszko	Democrat	House Dist 89

Name of candidate(s) opposed	Party affiliation	Office sought
Lance Harvell	Republican	House Dist. 89

PAC, party committee or other political committee supported	Address of committee

Support/Oppose	Referendum or initiated petition

HACC
Name of PAC

Page 1 of 1
(Schedule A only)

SCHEDULE A

CASH CONTRIBUTIONS RECEIVED

List the names and mailing addresses of contributors who have given more than \$50 during this reporting period. For all aggregate contributions of \$50 or less, enter the combined total in line 3. Do not include in-kind contributions or loans on this schedule.

Date received	Contributor's name, mailing address, zip code	Occupation & employer	Amount
2/3/09	Juliana C Heureux 1 Tunkin Run, Topsham ME 04086	Executive Director Maine Association of Municipalities	250.00
2/3/09	UNITED FOOD & COMMERCIAL WORKERS 1775 K Street, Washington DC 20006		1,000
1. Total contributions this page only			1,250
2. Total from attached pages (Schedule A)			1,250
3. Aggregate contributions of \$50 or less (not itemized)			40.00
4. Total contributions this reporting period (Add lines 1, 2 & 3)			1,290.00

HACC
Name of PAC

Page 1 of 1
(Schedule B only)

SCHEDULE B
CONTRIBUTIONS AND EXPENDITURES
TO OR ON BEHALF OF CANDIDATES, PACS & PARTY COMMITTEES

List all contributions and expenditures made to or on behalf of each candidate, party committee, PAC, or other political committee. Do not include loan repayments or in-kind expenditures on this schedule. Expenditures made on communications in support of or in opposition to candidates must be listed on this schedule, not on Schedule B-1. For expenditures made on multi-candidate communications, the expenditure must be itemized by the amount spent per candidate, not as a single expenditure, and each candidate must be identified.

Expenditure Types <u>REQUIRING NO</u> Remark		Expenditure Types <u>REQUIRING</u> Remark	
CON	contribution to candidate, party or committee	CNS	campaign consultants
EQP	equipment (office machines, furniture, cell phones)	OTH	other
FND	fundraising events	PRO	professional services
FOD	food for campaign events, volunteers		
LIT	printing and graphics (flyers, signs, palmcards, t-shirts, etc.)		
MHS	mail house (all services purchased)		
OFF	office rent, utilities, phone and internet services, supplies		
PHO	phone banks, automated telephone calls		
POL	polling and survey research		
POS	Postage for U.S. Mail and mail box fees		
PRT	print media ads only (newspapers, magazines, etc.)		
RAD	radio ads; production costs		
SAL	Campaign workers' salaries and personnel costs		
TRV	travel (fuel, mileage, lodging, etc.)		
TVN	TV or cable ads; production costs		
WEB	Website design; registration; hosting; maintenance, etc.)		

For every expenditure, list the appropriate code.

If a remark is required, list additional information such as type of consulting (media, messaging, campaign, etc.) or professional service provided.

Date of payment	Payee name	Candidate, committee, or party supported		Office sought & district number	Amount contributed to or spent on behalf of each candidate, PAC, or party committee
	Payee's complete mailing address	Code	Remarks		
2/4/09	Democratic Party PO BOX 5258 Augusta, ME 04232	COM	CONTRIBUTION	House 89	5,000.00
1. Total contributions to candidates this page only					5000.00
2. Total from attached Schedule B pages					
3. Total contributions this reporting period (Lines 1 + 2)					5,000.00

HACC
Name of PAC

Page 1 of 1
(Schedule B-1 only)

**SCHEDULE B-1
OPERATING EXPENSES**

Do not include loan repayments or expenditures made on communications to support or oppose candidates on this schedule.

Expenditure Types Requiring NO Remark		Expenditure Types REQUIRING Remark	
CON	contribution to candidate, party or committee	GNS	campaign consultants
EQP	equipment (office machines, furniture, cell phones)	OTH	other
FND	fundraising events	PRO	professional services
FOD	food for campaign events, volunteers		
LIT	printing and graphics (flyers, signs, palmcards, t-shirts, etc.)		
MHS	mail house (all services purchased)		
OFF	office rent, utilities, phone and internet services, supplies		
PHO	phone banks, automated telephone calls		
POL	polling and survey research		
POS	Postage for U.S. Mail and mail box fees		
PRT	print media ads only (newspapers, magazines, etc.)		
RAD	radio ads, production costs		
SAL	Campaign workers' salaries and personnel costs		
TRV	travel (fuel, mileage, lodging, etc.)		
TVN	TV or cable ads, production costs		
WEB	Website design, registration, hosting, maintenance, etc.)		

For every expenditure, list the appropriate code.

If a remark is required, list additional information such as type of consulting (media, messaging, campaign, etc.) or professional service provided.

Date of payment	Payee/organization name, address, zip code	Code	Remarks or purpose of expenditure	Amount
1/30/09	Kennebec Savings PO Box 50 Augusta, ME 04332	OTH	Bank Chrgs	5.24
2/27/09	Kennebec Savings PO Box 50 Augusta, ME 04332	OTH	Bank Chrgs	5.36
2/6/09	Jesse Connolly 239 Hammett St. 30. Portland, ME 04126	FOD		85.40
1. Total operating expenses this page				96.00
2. Total from attached Schedule B-1 pages				
3. Total operating expenses this reporting period (Add lines 1 & 2)				96.00

17 Dec
 Name of PAC

SCHEDULE C

IN-KIND CONTRIBUTIONS/EXPENDITURES

In-Kind CONTRIBUTIONS

With respect to all items and services received and expended, enter the date received, a description of the item or service, and the fair market value. Enter contributor information if the fair market value of donated item or service is more than \$50.

Date received	Contributors name, address, zip code	Description of goods, services, discounts or facilities received/expended	Fair market value

In-Kind EXPENDITURES

If the items shown above were, in turn, contributed to candidates or committees, list to whom the items were donated and their description.

Date of payment	Recipient's name, address, zip code	Description of goods, services, discounts or facilities contributed	Fair market value

SCHEDULE D

LOANS/LOAN REPAYMENTS

List loans and loan repayments from all sources.

Date of loan/ loan repayment	Identity of lender	COLUMN 1 Loan balance from previous period	COLUMN 2 Amount loaned this period	COLUMN 3		COLUMN 4 Unpaid loans Columns 1 + 2 - 3
				Amount repaid/ forgiven this period		
					R F	
					R F	
					R F	

SCHEDULE E

TOTAL UNPAID OBLIGATIONS (OTHER THAN LOANS)

List all goods or services that have not been invoiced and all existing unpaid bills.

Date obligation incurred	Creditor's name, address, zip code	Purpose	Amount

HOCC
Name of PAC

3/16/09
Date submitted

SCHEDULE F
SUMMARY SECTION

RECEIPTS

THIS PERIOD ONLY

- 1. Contributions received (Schedule A, Line 4)
- 2. Other receipts (interest income, etc.)
- 3. Loans received (Schedule D)
- 4. TOTAL RECEIPTS THIS PERIOD (Lines 1 + 2 + 3)

\$1,290.00
27.10
1,317.10

EXPENDITURES

THIS PERIOD ONLY

- 6. Contributions to or on behalf of others (Schedule B, Line 3)
- 6. Operating expenses (Schedule B-1, Line 3)
- 7. Loan repayments Made (Schedule D)
- 8. TOTAL EXPENDITURES THIS PERIOD (Lines 6 + 6 + 7)

5,000.00
96.00
5,096.00

CASH BALANCE

- 9. Account balance from last reporting period (Line 12 of previous report)
- 10. Plus total receipts this period (Line 4 above)
- 11. Less total expenditures this period (Line 8 above)
- 12. TOTAL funds on hand at close of reporting period
(This should equal your bank account balance(s) plus your petty cash balance)

34,861.54
1,317.10
5,096.00
31,082.64

IN-KIND SUMMARY

Fair Market Value Totals

Total In-Kind Contributions this period (Schedule C)

Total In-Kind Expenditures this period (Schedule C)
