



RECEIVED

MAR 17 2009

MAINE ETHICS COMMISSION

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

COMMITTEE IDENTIFICATION Check if address is different than previously reported.

Name House Republican Fund
(full name of committee)

Mailing address PO Box 5629
(official headquarters of committee)

City, zip code Augusta 04332 Telephone 341-5858

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

Name of treasurer Joshua Tardif

Mailing address Same as above

City, zip code _____ Telephone _____

E-mail address _____

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.

Henry Burt
Treasurer's Signature

3/17/09
Date

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 |
|--|---|-----------------------|----------|
| | <i>no election-related activity</i> | | |
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| 1. Total contributions this page only | | | |
| 2. Total from attached pages (Schedule A) | | | |
| 3. Aggregate contributions of \$50 or less (not itemized) | | | |
| 4. Total contributions this reporting period (Add lines 1, 2 & 3) | | | <i>Ø</i> |

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 Requiring NO Remark | | Expenditure Types REQUIRING 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 <u>each</u> candidate, PAC, or party committee |
|---|-------------------------------------|--|---------|---------------------------------|--|
| | Payee's complete mailing address | Code | Remarks | | |
| | <i>NO election-related activity</i> | | | | |
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| 1. Total contributions to candidates this page only | | | | | |
| 2. Total from attached Schedule B pages | | | | | |
| 3. Total contributions this reporting period (Lines 1 + 2) | | | | | <i>0</i> |

Name of PAC

**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 | 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/organization name, address, zip code | Code | Remarks or purpose of expenditure | Amount |
|--|--|------|-----------------------------------|----------|
| | <i>no election-related activity</i> | | | |
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| | | | | |
| 1. Total operating expenses this page | | | | |
| 2. Total from attached Schedule B-1 pages | | | | |
| 3. Total operating expenses this reporting period (Add lines 1 & 2) | | | | <i>0</i> |

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 |
|-----------------|-------------------------------------|---|-------------------|
| | | | |
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SCHEDULE D

LOANS/LOAN REPAYMENTS

List loans and loan repayments from all sources.

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

RECEIPTS

- 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)

THIS PERIOD ONLY

| |
|---|
| 0 |
| 0 |
| 0 |
| 0 |

EXPENDITURES

- 5. 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 5 + 6 + 7)

THIS PERIOD ONLY

| |
|---|
| 0 |
| 0 |
| 0 |
| 0 |

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)

| |
|----------|
| 10282.81 |
| 0 |
| 0 |
| 10282.81 |

IN-KIND SUMMARY

- Total In-Kind Contributions this period (Schedule C)
- Total In-Kind Expenditures this period (Schedule C)

Fair Market Value Totals

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