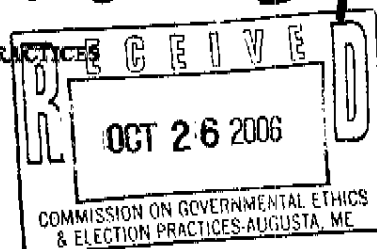


1.E.#34

STATE OF MAINE
COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station
Office: 242 State Street
Augusta, Maine 04333
Tel: (207) 287-4179 Fax: (207) 287-6775
www.maine.gov/ethics



CAMPAIGN FINANCE REPORT
OF 2006 INDEPENDENT EXPENDITURES

Name of Person/Committee Making Expenditure(s) Maine Senate Republican Victory Fund
Mailing Address: P.O. Box 7342
City, Zip Code Portland, Maine 04112 Telephone 207.510.7636

INSTRUCTIONS

Complete the notarized affidavit and attached schedules. Please check the appropriate box for the report you are filing. Please see previous page for reporting requirements.

INDEPENDENT EXPENDITURES OF MORE THAN \$250 PER CANDIDATE

Independent expenditures of more than \$250 per candidate must be reported to the Commission within 24 hours of making the expenditure. Please be aware that under the Commission's Rules making an expenditure includes placing an order for a good or service or making a promise or agreement that a payment will be made.

Report of Independent Expenditure over \$250

INDEPENDENT EXPENDITURES OF MORE THAN \$100 AND UP TO \$250 PER CANDIDATE

Primary Election		General Election	
Reporting Period	Filing Deadline	Reporting Period	Filing Deadline
<input type="checkbox"/> Through June 1	June 1	<input type="checkbox"/> June 14 - July 5	July 15
<input type="checkbox"/> After June 1	Within 24 Hours	<input type="checkbox"/> July 6 - Sept. 30	October 10
		<input checked="" type="checkbox"/> October 1 - 25	October 26
		<input type="checkbox"/> After October 26	Within 24 Hours

OTHER

- Amendment to Earlier Report Dated: _____
- Other(specify): _____

I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT AND COMPLETE.

Ry W. Smardon

10/25/06

Signature of PAC or Party Treasurer, or
Other Person Making Expenditure(s)

Date

Schedule B-IE-1

CANDIDATE(S) SUPPORTED/OPOSED

- Please list all candidates that were the subject of independent expenditures.
- If more than one candidate was the subject of the expenditures, allocate the expenditure among the candidates.

Office sought by candidate (including district #)	Candidate's Name	Indicate whether expenditure was made in support of or in opposition to the candidate	Amount expended this reporting period for each candidate
SENATE Dist #7	Kevin Glynn	SUPPORT	493.00

Schedule B-IE-2

PAYMENTS AND OBLIGATIONS

- Please indicate the date, payee, expenditure type, and amount of each expenditure.
- If you are reporting an agreement or obligation to make a future payment, please check (✓) the box next to the purpose of the expenditure.

Expenditure Types	
LIT Campaign literature (printing and graphics)	PRT Film materials
MHS Mail house (all services purchased)	RMD Records, production costs
PHD Phone banks; automated telephone calls	TWN TV or cable ads, production costs
POL Filing and research survey	WEB Internet and e-mail
POS Postage for U.S. mail	OTH Other (include description)

Date of expenditure	Payee, address, zip code	Expenditure Type	✓	Amount
10/23	Cape Courier, PO BX 6242 Cape Eliz 04107	PRT		\$493.00
A. Expenditures for this page =>				\$493.00
B. Total for all other Schedule B-IE-2 pages (if any) =>				
C. Total independent expenditures for this reporting period (A+B) =>				\$493.00