

## Received AUG 3 1 2018

Maine Ethics Commission

## COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

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## **UPDATED STATEMENT OF SOURCES OF INCOME FOR LEGISLATORS**

Name:	Office & District Number:						
Gamet Muson	☐ House ☐ Senate 22						
REQUIREMENT TO FILE AN UPDATED STATEMENT							
Legislators are required to update their statement of sources of income within 30 days of a substantial change in income, reportable liabilities, or positions of the Legislator and the Legislator's spouse or domestic partner that occurs in the current calendar year. (1 M.R.S.A. § 1016-G(2)(B)) Substantial changes include, but are not limited to, a new employer or other source of income of \$2,000 or more; a new position in a political committee or for-profit or non-profit organization; a new unsecured loan of \$3,000 or more; and other substantial changes in the information required to be reported in the statement of sources of income. Please report only new information. Do not include information that you previously reported.							
PART 1. INCOME FROM EMPLOYMENT BY ANOTHER	Date of Change: ∠०\४/८%	-01					
Name and Address of Employer  Eaten Run Stratege Olivia Comberland, ME  Principal Type of Economic or Business Activity of Employer:  Job Title:							
Public Relations OP/Partner							
PART 2. INCOME FROM SELF-EMPLOYMENT  Date of Change:							
Name and Address of Your Business:							
Principal Type of Economic or Business Activity:							
Name and Address of Customer/Client, if required:							
Gustomer/Client's Principal Type of Economic or Business Activity:							
PART 3. BUSINESS ENTITIES	Date of Change:						
Name and Address of Business:							
Principal Type of Economic or Business Activity:							
PART 4. INCOME FROM THE PRACTICE OF LAW	Date of Change:	Date of Change:					
Name and Address of Practice or Firm:							
Firm's Major Areas of Practice: Your Major Areas of Practice:	Position (Partner, Associate, Sole Practitioner):						
PART 5. INCOME FROM ANY OTHER SOURCE	Date of Change:	Date of Change:					
Name and Address of Income Source;							
Description of Income:							

PART 6-A. INCOME OF IMMEDIATE FAMILY MEMBERS			Date of Change	Date of Change:		
Name of Family Member:		Job Title:				
Name and Address of Employer:		Employer's Princip	Employer's Principal Type of Economic or Business Activity:			
PART 6-B. OTHER SOU	RCE OF INCOME OF IMMEDIA	ATE FAMILY MEI	MBERS Date of Change	):		
Name of Family Member:		Type of Income:				
Name and Address of Source of Income:						
PART 7. LOANS AND LIABILITIES  Name and Address of Lender:			Date of Change	Date of Change:		
Lender's Principal Type of Economic or Busi	iness Activity:					
PART 8. GIFTS (INCLUDI	ES TRAVEL AND ACCOMODA	ATIONS)	Date of Change	<del>}</del> :		
Source of Gift:		Source of Gift:				
Part 9. Honoraria			Date of Change			
Source of Honoraria:		Source of Honorari	Source of Honoraria:			
PART 10. POSITIONS IN	PACs, BQCs or Party (	COMMITTEES	Date of Change	e:		
Name of Legislator or Family Member:			Title:	·		
PART 11. CONDUCTING BUSINESS WITH STATE AGENCIES  Name of Agency:			Date of Change	Date of Change:		
Name of Individual/Organization Selling Goo	ds or Services:					
Description of Goods or Services:						
PART 12. REPRESENTING OTHERS BEFORE STATE AGENCIES			Date of Change	<b>:</b>		
Name of Agency:						
Name of Individual Receiving Compensation	:					
PART 13. Positions in	For-Profit and Non-Pr	OFIT ORGANIZA	TIONS Date of Change	);		
Name of Position Holder	Name and Address of Organization/Business	Title	Relationship to Legislator	Compensated		
			□ Self □ Spouse □ Dependent	□ Yes □ No		
I certify that I have examined th	SI is Jeport and to the best of my kno	GNATURE owledge it is true, co	rrect, and complete.			
Sprodly	and		2018/0	58-30		
	Signature			Data		

THE INTENTIONAL FILING OF A FALSE STATEMENT IS A CLASS E CRIME (1 M.R.S.A. § 1016-G(3)(B))