

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/ethlos 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         | Maire Democratic Party  |                                    | ☐ CHECK IF<br>CHANGED                               |
|---------------------------|---|------------------------------------|---|
| STREET                    | 320 Water Street  |                                    |   |
| CITY AND ZIP CODE         | Augusta, ME 04330   | TELEPHONE NUMBER 707-590-0159      | FROM<br>PREVIOUS<br>REPORT                          |
| E-MAIL                    | Scarchistophersmith & smi   | 1. com                             |   |
| NAME OF TREASURER         | Bity Johnson  |                                    | -   |
| MAILING ADDRESS<br>STREET | P.O. B. 5258  |                                    | O CHECK IF<br>CHANGED<br>FROM<br>PREVIOUS<br>REPORT |
| CITY AND ZIP CODE         | Augusti, ME 04372   | TELEPHONE 701-622-7431             |   |
| É-MAIL                    |   |                                    |   |
| Type of Report            | <u>Due Date</u>   | Dates of Report Period             | **************************************              |
| 以 11-Day Pre-Elect        | ion October 23, 2016  | August 27, 2015 — October 20, 2015 |   |
| □ 42-Day Post-Ger         | eral December 15, 2015  | October 21, 2015 — December 8, 201 | 5   |
| ☐ Amendment to:           |   |                                    | ļ   |
|                           | rt: Use only if the committee had no contributi<br>obligations during the reporting period. Check |                                    |   |

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

Treasurer's Signature

| PAC/PTY Name |  |
|--------------|--|
|              |  |

| Page | of          |
|------|-------------|
| Sche | dule B Only |

### 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.

|         | EXPENDI   | TURET        | /ÞEŠ  | trifesitina suus | 1281482636818465373W11949 |
|---------|---|--------------|---|------------------|---------------------------|
| CON     | Contribution to candidate, party or committee                                     | POL          | Polling and survey reses                      |                  |                           |
| CNS     | Campaign consultants  | POS          | Postage for U.S. Mall an                      | ***              | 8                         |
| EQP     | Equipment (office machines, furniture, cell phones)                               | PRO          | Professional services                         | ,,,,,            |                           |
| FND     | Fundraising events  | PRT          | Print media ads only (ne                      | wspapers, ma     | gazines, etc.)            |
| FOD     | Food for campaign events, volunteers  | RAD          | Radio ads, production co                      |                  |                           |
| LIT     | Printing and graphics (flyers, signs, palmcards, t-shirts, etc.)                  | SAL          | Campaign workers' salar                       | ies and perso    | nnel costs                |
| MHS     | Mail house (all services purchased)   | TRV          | Travel (fuel, mileage, lod                    |                  | . ,                       |
| OFF     | Office rent, utilities, phone and internet services, supplies                     | TVN          | TV or cable ads, product                      | 1.7              |                           |
| ОТН     | Other   | WEB          | Website design, registral                     | ion, hosting, n  | raintenance, etc.)        |
| PHO     | Phone banks, automated telephone calls  |              |   | LEAM.AL          |                           |
|         | Remark régulieu (c  | ir All exper | dlure types!                                  |                  |                           |
| DATE    | ,   | REMAR        | KS (REQUIRED)                                 | TYPE             | AMOUNT                    |
| 10/1/19 | COAMERCIAL St. RetladIME  OHIOL  Payment to support & or to oppose 0:  Lyna Olsia | M.:          |   | MAS              | 1008.70                   |
| 10/15/1 | Lyna Olson  | Ma           | ì (   | MHS              | 1875.80                   |
|         | Payment to support □ or to oppose □:  Payment to support □ or to oppose □:        |              |   |                  |                           |
|         |   | Total exp    | penditures this page<br>oust be listed on Sch | only ⇒           | 288450                    |

| PAC/PTY Name | • |
|--------------|---|
|              |   |

## SCHEDULE F SUMMARY SCHEDULE

### **CASH ACTIVITY**

| Receipts  | Total for this Period |
|---|-----------------------|
| 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 |
| i. Expenditures to Support or Oppose (Schedule B) | 2884.50               |
| 6. Operating Expenditures (Schedule B-1)          |                       |
| 7. Loan Repayment (Schedule C)                    |                       |
| 3. Total Payments (lines 5 + 6 + 7)               | Z884.50               |

# CASH SUMMARY

|   | Total for This Period |
|---|-----------------------|
| 9. Cash Balance at Beginning of Period              | 0                     |
| 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                   | - 2884.50             |

### 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) |                       |