

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/ethics

Phone: 207-287-4179 Fax: 207-287-6775

INDEPENDENT EXPENDITURE REPORT - 2016 GENERAL ELECTION

Name of Person/Committee Making Expe	enditure(s): Christian Cia	vic League				
Mailing Address: 50 Sewa	-11 5t.,	<u> </u>				
Mailing Address: D Sewell St., City, State, Zip Code: Auguste Telephone: 307-632-7634						
Please check the appropriate box for the Reports must be filed on Saturday or Su The Commission must receive the signed	nday if that is when they are due by faxii	notarized affidavit and attached schedules. ng the report to the Commission (287-6775). was received.				
Check here if this report is an amendment to a previously filed report. Date of original report: Independent Expenditures of more than \$250 per candidate must reported according to the schedule below.						
Report	Expenditure Made	Report Due Date				
☐ 60-Day Pre-Election Report	On or before September 8, 2016	September 9, 2016				
☐ 2-Day Report	Between September 9 - October 25, 2016	Within 2 calendar days of making the expenditure				
1-Day Report	Between October 26 - November 8, 2016	Within 1 calendar day of making the expenditure				
CERTIFY THAT THE INFORMATION IN	THIS REPORT IS TRUE, CORRECT AN	ID COMPLETE.				
lawll I Con	lly 1	11/7/16				
Signature of PAC or Party Tro Other Authorized Person Making		Date				

Schedule B-IE-1 CANDIDATE(S) SUPPORTED/OPPOSED

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

Office sought by candidate (including district # or county)	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
State Sen #JAnostouk	Ricky Long	Support	\$500
This ar	Total expenditures for a nount should equal the total independent expenditur	III candidates this reporting period. res listed on Schedule B-IE-2, Line C. ⇒	\$600

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 <u>future payment</u>, please check (✓) the box next to the expenditure type.

Expenditure Types							
LIT MHS PHO POL POS	Mail ho Phone Polling	ng and graphics (flyers, signs, palmcards, etc.) ouse (all services purchased) e banks, automated telephone calls g and research survey ge for U.S. Mail and mail box fees					
	Date of Payee, Address, Zip Code		Expenditure Type		Amount		
111	1	Rockwood Solutions POBOX 1075 manchester, NH D	3/05)	OTH Facebook ad	V	\$600
A. Expenditures for this page ⇒					ge ⇒	\$600	
B. Total for all other Schedule B-IE-2 pages (if any) ⇒					y) ⇒		
C. Total independent expenditures for this reporting period (A+B). ⇒ This amount should equal the total amount for all candidates listed on Schedule B-IE-1.							



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AFFIDAVIT

STATE OF
COUNTY OF Kenne ber
I, Carroll Coviley , being duly sworn, attest that I made each of
the expenditures listed in the attached report independently, and not in cooperation, consultation,
or concert with, or at the request or suggestion of, any candidate, authorized committee or agent
of a candidate in a race affected by any expenditure listed in this report.
Signature of Affiant (avel 2 Can 11/7/16
Sworn to before me, this 714 day of November 2016
(Notary Public/Attorney at Law)
STEVEN ARNOLD My commission expires: Notary Public State of Maine My Commission Expires August 4, 2022