

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

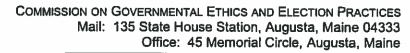
INDEPENDENT EXPENDITURE REPORT - 2016 GENERAL ELECTION

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

Name of Person/Com	mittee Making	g Expenditure(s): _	Leadeship	For Maine	Future		
Mailing Address:	Po B	ox 476					
City, State, Zip Code:	New	port ME	04953 Telephone:	207 - 341	-0555		
Please check the appropriate box for the report you are filing and complete the notarized affidavit and attached schedules. Reports must be filed on Saturday or Sunday if that is when they are due by faxing the report to the Commission (287-6775). The Commission must receive the signed original report within 5 days after the fax 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.							
Repo	net.	Ev	penditure Made	Penor	Due Dete		
		EA.	pendicare made	Report	t Due Date		
☐ 60-Day Pre-Elect			September 8, 2016	September 9, 2016	t Due Date		
		On or before		September 9, 2016			
☐ 60-Day Pre-Elect		On or before Between Sep	September 8, 2016	September 9, 2016 Within 2 calendar day the expenditure	s of making		

11/2015

October 6, Toto





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INDEPENDENT EXPENDITURE REPORT - GENERAL ELECTION

AFFIDAVIT

STATE OF Maine						
COUNTY OF Kennebec						
1, Ken Fredelle	, 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						
Sworn to before me, this day of	ober 2016					
(Notary Public/Attorney at Law)	_					
My commission expires: 9129122						

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	
5	Beth O'Connor	Support	\$2415.95	
95	Beth O'Connor Paula Sutton	Support	\$2415.95 \$2415.95	
This	Total expenditures for all can amount should equal the total independent expenditures list	didates this reporting period. ⇒ ted on Schedule B-IE-2, Line C.	\$4831.90	

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 he Phone Polling	g and graphics (flyers, signs, palmcards, etc.) ouse (all services purchased) banks, automated telephone calls and research survey ge for U.S. Mail and mall box fees	PRT RAD TVN WEB OTH	Print media ads only (newspapers, magazines) Radio ads, production costs TV or cable ads, production costs Website design, registration, hosting, maintenance, etc. Other (Include description)			
	Date of Payee, Address, Zip Code			Expenditure Type	1	Amount	
10/4/	16	Action Point LLC PO Box 9546 Portlo	~d, 1	1E OYIIZ	LIT		\$ 4831.90
				:			
							,
A. Expenditures for this page ⇒					ge ⇒	\$4831.90	
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.						\$4831.90	