

Received MAY 16 2016 COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES Mail: 135 State House Station, Augusta, Maine 04333 Office: 45 Memorial Circle, Augusta, Maine

MAY 1 6 2016 Maine Ethics Commission

Website: www.maine.gov/ethics Phone: (207) 287-4179 Fax: (207) 287-6775

2016—SD 32 Special Election Report of Membership Organization or Corporation Communications

MEMBERSHIP ORGANIZATION OR CORPORATION

Name: <u>Maine</u>	<u>State Em</u>		Associatio		
		(Full nam	e of member organ	ization or corporation)	
Mailing Address:	<u>65 State</u>	Street			
City, State, Zip Code:	Augusta,	Maine	04330	Telephone: <u>(207)622-315</u>	1

INSTRUCTIONS:

Any membership organization or corporation that makes a communication to its members or stockholders expressly advocating the election or defeat of a clearly identified candidate shall report any expenses related to such communications aggregating in excess of \$50 in any one candidate's election race. These expenses are not "independent expenditures." "Expressly advocate" and "clearly identified" are defined in Chapter 1, Section 8(2) of the Commission's Rules (available on the Commission website). Reports may be faxed to the Commission, provided that the original is received within <u>5 days</u> after the fax.

Filing Schedule for Repor	Filing Schedule for Reports of Membership Organization and Corporate Communication					
Report Name	Due Date	Reporting Period				
□ 42-Day Pre-Election	February 16, 2016	February 1 — February 9				
□ 11-Day Pre-Election	March 18, 2016	February 10 — March 15				
42-Day Post-Election	May 10, 2016	March 16 — May 3				

If this is an amendment to a filed report, check this box and indicate which report is being amended.

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

ALLE M ature of Authorized Officer of Employee

5-16-16 Date

Page <u>1</u> of <u>1</u> (Schedule B-1 only)

SCHEDULE B-1

CANDIDATE(S) SUPPORTED/OPPOSED

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

Office sought by candidate (Including district #)	Candidate's Name	Indicate whether the expense was made in support of or in opposition to the candidate	Amount expended this reporting period for each candidate
Senate Díst#32	Susan Deschambault	support	\$200.76
	· · · · · · · · · · · · · · · · · · ·		
	·		
	Total expenses for all car This amount should equal the total expenses list	didates this reporting period. and on Schedule B-2, Line C. \Rightarrow	200.76

Page <u>1</u> of <u>1</u> (Schedule B-2 only)

SCHEDULE B-2

PAYMENTS AND OBLIGATIONS

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

		Expens	е Туре		· · · · · · · · · · · · · · · · · · ·			
LIT	Printin	ng and Graphics (flyers, signs, palmcards, etc.) PRT Print media ads only (newspa					er, magazine)	
MHS	Mail h	Mail house (all services purchased)			Radio ads, production costs			
рно				TV or cable ads, production costs				
POL	Polling	Polling and research survey WEB Website design, registration, h			ion, ho	osting, maintenance		
POS	Postag	e for U.S. Mail and mail box fees	отн	Other	(include description			
Paym	te of ient or gation	Payee, Address, Zip Code			Expense Type	.	Amount	
3/2	2/201	Quality Copy 6 [44]North Street, Hallowe	11,	ME ./	2 ALIT		116.83	
3/2	Unițed States Post Office POS 2/2016 Western Ave., Augusta, ME 04330					82.45		
3/2	2/201	Maine State Employees A 6 65 State Street August		E 043	OTH(supp1 30	ies)	1,48	
	:							
				A. Exp	penses for this pa	ge ⇒	200.76	
		B. Total for all o	other S	Schedu	le B-2 pages (if an	y) ⇒		
	This am	C. Total exper ount should equal the total amount for all ca			eporting period (A		200,76	