

# Received

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

Maine Ethics Commission

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

## 2018—REPORT OF MEMBERSHIP ORGANIZATION OR CORPORATION COMMUNICATIONS

## **MEMBERSHIP ORGANIZATION OR CORPORATION**

Name: AI	FL-CI	$\mathcal{O}$			
				rganization or corpor	ation)
Mailing Address:	815	164	Street	N.W.	
City, State, Zip Co	de: <u>Was</u>	hing to	n, DC. 20	DOOG Telephor	ne: <u>202-637-50</u> 02

### **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 Reports of Membership Organization and Corporate Communication					
Report Name	Due Date	Reporting Period			
42-Day Pre-Primary	May 1, 2018	January 1 — April 24			
11-Day Pre-Primary	June 1, 2018	April 25 — May 29			
42-Day Post-Primary	July 24, 2018	May 30 — July 17			
42-Day Pre-General	September 25, 2018	July 17 — September 18			
🗹 11-Day Pre-General	October 26, 2018	September 19 — October 23			
42-Day Post-General	December 18, 2018	October 24 — December 11			

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.

sicherte-H. Shul-

Signature of Authorized Officer of Employee

Date

Membership Organization or Corporation Communications

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Page  $\frac{1}{(\text{Schedule B-1 only})}$ 

# 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
Governor	JANET MILLS	SUPPORT	*19,476.43 *8,719.54
Governor	Shawa Moody.	OPPOSE	\$8,719.54
	a8,195.97		

Membership Organization or Corporation Communications

Page  $\frac{2}{(\text{Schedule B-2 only})}$ 

### 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	g and Graphics (flyers, signs, palmcards, etc.) PRT Print r			media ads only (newspaper, magazine)			
мнѕ	Mail house (all services purchased)			Radio ads, production costs				
рно	PHO Phone banks, automated telephone calls TV			TV or cable ads, production costs				
POL Polling and research survey WEI			WEB	Website design, registration, hosting, maintenance				
Paym	Date of Payment or Payee, Address, Zip Code Obligation			1	Expense Type	~	Amount	
10/1	10/4/18 Mosaic 4801 Viewpount PL-Hyattsville.MD. 20781				LIT		\$180.00	
10/6	0/6/18 MOSAIC 4801 View point PL. Hyattsville .MD. 20781				LIT		# 60.00	
10/7/	10/7/18 TBW 400 Montgomery St. # 700 San Francisco. (A 94104				MHS		#14,060.32	
10/13	3/18	MOSAIC 4801 Viewpoint PL. Hyatsville,	20781	LIT		\$ 60.00		
10/17	18	TBW 400 Montgomery St.#700. San Fra	0.0.CA	MHS		\$6,757.51		
10/22	2/18	MOSAIC 4801 Viewpoint PL. Hyatsville, MD. 20781			LIT		\$ 60.00	
10/2	3 18	B TBW 400 Montgomery St # 700 . San Francisco. CA. 94104			MHS		\$7,018.14	
				<b>A</b> Ex-	oppose for this re		\$ Data and	
	A. Expenses for this page $\Rightarrow 28,195,9$ B. Total for all other Schedule B-2 pages (if any) $\Rightarrow$						a8,195.9+	
C. Total expenses for this reporting period (A+B). This amount should equal the total amount for all candidates listed on Schedule B-1. $\Rightarrow$						# 28,195.97		