2009 Special Election



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES Mail: 135 State House Station, Augusta, Maine 04333 Office: 242 State Street, Augusta, Maine



JAN 2-3 2009

MAINEETHICS COMMISSION

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

2009 CAMPAIGN FINANCE REPORT – HOUSE DISTRICT 89 SPECIAL ELECTION POLITICAL ACTION COMMITTEES

COMMITTEE IDENTIFICATION Check if address is different than previously reported.							
Name	Howse Republican	Fund					
Mailing ac	idress PU By 54	(full name of committee)					
City, zip c	ode Augusta, Od	(official headquarters of comr 1330	nittee) _Telephone <u>341-5858</u>				
TREASURE	TREASURER IDENTIFICATION Check if treasurer or address is different than previously reported.						
Name of t	reasurer Joshua Tan	dy					
Mailing ac	idress Pl Bux 5629	?					
City, zip c	ode Augusta, O	1330	Telephone 341-5858				
E-mail ad	dress_tondy/aw @ m	ad runner. com	/ hairp @ gmail. com				
	0						
POLITICAL ACTION COMMITTEE FILING PERIODS (Check applicable period below):							
\	Report Type	Due Date	Reporting Period				
\mathbf{X}	11-Day Pre-Primary	January 23, 2009	January 6, 2009 – January 20, 2009				
	42-Day Post-Primary	March 17, 2009	January 21, 2009 – March 10, 2009				
	Check this box if this report is	s an amendment to a p	reviously filed report.				

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

Treasur Signature s

23/09 Date

(Revised 01/09) (Duplicate as needed)

Name of PAC time Rosublican Fund

PURPOSE OF COMMITTEE (Complete each category that applies for this reporting period.)

Name of candidate(s) supported	Party affiliation	Office sought
all House Republican Candidates	R	lepresentative
• • • • • • • • • • • • • • • • • • •		
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· · · · · · · · · · · · · · · · · · ·		

Name of candidate(s) opposed	Party affiliation	Office sought

PAC, party committee or other political committee supported	Address of committee

Support/Oppose	Referendum or initiated petition	

use Roublican Fund Name of P

SCHEDULE A

CASH CONTRIBUTIONS RECEIVED

List the names and mailing addresses of contributors who have given more than \$50 during this reporting period. For all aggregate contributions of \$50 or less, enter the combined total in line 3. Do not include in-kind contributions or loans on this schedule.

Date received	Contributor's name, mailing address, zip code	Occupation & employer	Amount
1/20/09		Legislator, state of Marie	100,00
1116/09	H. Sawin Millett. Jr. Experience Counts PA 37 Golden Guernsey Mive Waterfund ME 64088	legistation, source of I deline	56.00
1/11/109	H. Sawin Millett, Jr., Experience Burts PAC 37 Golden Guensay Dr., Walerford, ME 04088	legislator, State of Maine	50.00
1/20/09	ME Truck PAC PU BOX 857 Augusta, ME 04330		200.00
1/20/09	Maria Fucates 21 Union Street, Hallard, ME 04347	Executive Director, Maine Better Namportation Chvillengineer, CPM Construction	100.00
1/20/09	Eidon Montson 181 Spruce Point Road, Yournoith, ME DYME	Chilengineer, CPM Construction	(00,00
1/20/09	Jackson Parker. 66 The Narrows Rd, Woolwich, ME 04579	Construction, Reed & Reed Construction	100.0D
1. Total contributions this page only			
2. Total from attached pages (Schedule A)			
3. Aggregate contributions of \$50 or less (not itemized)			
4. Total contributions this reporting period (Add lines 1, 2 & 3)			

e Republican Fund Name



SCHEDULE F

SUMMARY SECTION

RECEIPTS

- 1. Contributions received (Schedule A, Line 4)
- 2. Other receipts (interest income, etc.)
- 3. Loans received (Schedule D)
- 4. TOTAL RECEIPTS THIS PERIOD (Lines 1 + 2 + 3)

EXPENDITURES

- 5. Contributions to or on behalf of others (Schedule B, Line 3)
- 6. Operating expenses (Schedule B-1, Line 3)
- 7. Loan repayments Made (Schedule D)
- 8. TOTAL EXPENDITURES THIS PERIOD (Lines 5 + 6 + 7)

CASH BALANCE

- 9. Account balance from <u>last</u> reporting period (Line $\frac{1}{2}$ of <u>previous</u> report)
- 10. Plus total receipts this period (Line 4 above)
- 11. Less total expenditures this period (Line 8 above)
- 12. TOTAL funds on hand at close of reporting period (This should equal your bank account balance(s) plus your petty cash balance)

IN-KIND SUMMARY

Total In-Kind Contributions this period (Schedule C)

Total In-Kind Expenditures this period (Schedule C)

THIS PERIOD ONLY



THIS PERIOD ONLY





Fair Market Value Totals

