APR 28 2011 Maine Ethics Commission	COMMISSIC SPECIAL ELECTION SENATE #7 IE#9 Fax: 207-287-6775						
INDEPENDENT EXPENDITURE REPORT - SEN	IATE DISTRICT 7 SPECIAL ELECTION						
Name of Person/Committee Making Expenditure(s)	Epe Elizabeth Republica Comute						
Mailing Address <u>(Se VIEW Ave</u> City, Zip Code <u>Gapp Glizzbeth Maine</u> Telephone <u>799-1634</u>							
The requirement to file an independent expenditure report is based on the total or aggregate amount spent per candidate for the election. When the total expenditures per candidate exceeds the threshold amount, a report must be filed by the appropriate deadline.							
Please check the appropriate box for the report you are fili	ing and complete the notarized affidavit and attached schedules.						
Reports must be filed on weekends and holidays 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.							
Is this an amendment to a previously filed report?							
TOTAL INDEPENDENT EXPENDITURES OVER \$100 PER CANDIDATE							
MADE ON OR BEFORE APRIL 26, 2011:							
☐ 14-Day Pre-Election Report	Due by 5:00 p.m. on April 26, 2011						
TOTAL INDEPENDENT EXPENDITURES OVER \$100 PER CANDIDATE WITHIN 13 DAYS BEFORE THE ELECTION							
MADE ON OR AFTER APRIL 27, 2011 THROUGH MAY 9, 2011:							
24-Hour Report	Within 24 hours of exceeding \$100						
I CERTIFY THAT THE INFORMATION IN THIS REPORT	IS TRUE, CORRECT AND COMPLETE.						

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

4-128/11 Date



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

INDEPENDENT EXPENDITURE REPORT - SENATE DISTRICT 7 SPECIAL ELECTION

AFFIDAVIT

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I, <u>Willier H. GLOS ET</u>, 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, the candidates named in the report or the authorized committees or agents of the candidates.

Signature of Affiant

Sworn to before me, this 287 day of ____ AC 2011

(Notary Public Attorney at っい bar #004410 My commission expires:

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		
507	Loure Marette	Support	\$330		
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2 					
Total expenditures for all candidates this reporting period.This amount should equal the total independent expenditures listed on Schedule B-IE-2, Line C.					

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 ($\sqrt{}$) the box next to the expenditure type.

Expenditure Types					
LIT	Printing and graphics (flyers, signs, palmcards, etc.)	PRT	Print media ads only (newspapers, magazines)		
MHS	Mail house (all services purchased)	RAD	Radio ads, production costs		
PHO	Phone banks, automated telephone calls	TVN	TV or cable ads, production costs		
POL	Polling and research survey	WEB	Website design, registration, hosting, maintenance, etc.		
POS	Postage for U.S. Mail and mail box fees	OTH	Other (include description)		

Date of expenditure	Payee, address, zip code	Expenditure type	\checkmark	Amount	
4/07/11	GRECUMENT P.D. BOX 6242 Cape Elizabeth ME 004107	ALT	V	330.—	
	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. \Rightarrow					