

IE - 9

# INDEPENDENT EXPENDITURE REPORT - 2015 HD 23 SPECIAL ELECTION

Name of Person/Committee Making Expenditure(s)	Densentie Porty
Mailing Address 320 Water Strict	
City, Zip Code Auzusta, ME 04370	Telephone 207-590-0759

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.

INDEPENDENT EXPENDITURES OVER \$250 Any Expenditure Over \$250 Any Expenditure Over \$250 Expenditures Aggregating Per Candidate Made from Octo-Per Candidate Made from over \$250 made from Sepber 21, 2015 through Novem-October 15, 2015 through **Report Type** tember 4, 2015 through ber 3, 2015 October 20, 2015 (select one) October 14, 2015 **Z**. Within 1 calendar day of making Within 2 calendar days of mak-Within 2 calendar days of **Due Date** the expenditure ing the expenditure making the expenditure Any expenditure over \$250 per Any expenditure over \$250 per Expenditures aggregating What Gets Reported candidate over \$250 per candidate candidate

OTHER INDEPENDENT EXPENDITURES

Report (select one)	☐ 60-Day Pre-Election Report	口 11-Day Pre-Election Report
Due Date	September 4, 2015	October 23, 2015
What Gets Reported	Expenditures aggregating over \$100 per candidate from August 11 through Sep- tember 3, 2015	Expenditures aggregating over \$100 per candidate but not over \$250 from September 4 through October 14, 2015

I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT AND COMPLETE.

₹.

from September 4, 2015 through October 14, 2015

10/23/15

Signature of PAC or Party Treasurer, or Other Authorized Person Making Expenditure(9)



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

## INDEPENDENT EXPENDITURE REPORT - 2015 HD 23 SPECIAL ELECTION

### AFFIDAVIT

Maira STATE OF Lunbulal COUNTY OF

I,  $\underline{\sum}$   $\underline{\sum}$ 

Signature of Affiant

Sworn to before me, this <u>28</u><sup>D</sup> day of <u>OCTOBER</u> 2015

(Notary Public/Attorney at Law)

My commission expires: 4/16/2022



### 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)	Cand	fdate's name	Indicate whether expenditure was made in support of or in opposition to the candidate	Amount expended this reporting period for each candidate		
HD 23		n Olson	Support	1875.80		
2000-11-11-11-11-11-11-11-11-11-11-11-11-						
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זיז	Total expenditures for all candidates this reporting period.This amount should equal the total independent expenditures listed on Schedule B-IE-2, Line C. $\Im$ 1875.80					

#### 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					
LLT Printing and graphics (flyers) signs, palmbards) etc.) PRT: Print media ads only (newspapers, magazines). MHS Mail house (all services purchased) PRT: Radio eds, production costs						
POL	banks, automated telephone calls. and research survey je for U.S. Mail and mail box fees. TVN WEB OTH Other (Include description)	ance, elc				
Date of expenditure	Payee address, zip code	Amount				
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10/22/15	LOZ Consulting, 400 Commercial St. MHS V Portland. ME OULOU	1775.80				
+ 4 h.						
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