RECEIVED COMMISSION Special Election, Senate #	110
	<i>F</i> 19
AUG 2 2013	
Website: www.maine.gov/e	thics
INDEPENDENT EXPENDITURE REPORT - SD 19 SPECIAL ELECTION	4179 3775
Name of Person/Committee Making Expenditure(e) Microsoft Devices ID	
Mailing Address PO Box 5258	
City, Zip Code <u>Augusta</u> , <u>ME</u> <u>O133</u> Telephone <u>207-622-6233</u>	
Reports relating to legislature box for the report you are filing and complete the notarized affidavit and which	les,
due. However, reports relating to county or municipal candidates must be filed on Saturday or Sunday if that is when they Reports may be faxed to the Commission (287-6775). The Commission must receive the signed original report withi days after the fax was received.	are n 5
Check here if this report is an amendment to a previously first	
A STATE OF A DEPARTMENT OF A DEPART	
 Independent expenditures made before August 14, 2013, that total more than \$250 per candidate must be reported within 2 calendar days of making the expenditure. 	
Each time the total amount spent per candidate exceede social to a second social to	
Report of Independent Expenditure over \$250 per Candidate	
INDERENDENT/EXPENDIT///FESCOVISE Surveys and a sole per calificate Expenditures totaling more than \$100 but not more than \$250	5
reported by August 16, 2013.	1222
 If the total of independent expenditures made to survey to 	
amount spent to support or oppose the candidate must be reported as an independent expenditure.	
□11-Day Pre-Election Report of Independent Expenditures over \$100 and up to \$250 per Candidate	
INDERENDENTEXPENDITURES OVERSION APPENDENTED AUGUST DE LINGUST DE LINGUST 20.2010	
be reported within 1 calendar day of making the expenditure	
 If the total of independent expenditures made to support or oppose a candidate exceeds \$100, each subsequent amount spent to support or oppose the candidate must be reported as an independent expenditure. 	
Linepole of independent Expenditure over \$100 por Constitute	
The reports are due by 5:00 p.m. on the filing deadline.	
 Do not include expenditures that you listed on previously filed report. 	
I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT AND COMPLETE.	
Signature of PAC or Party Committee Treasurer, or SI 2 2013 Other Authorized Person Making Expenditure(s) Date	
Other Authorized Person Making Expenditure(s) MWY EVIN (ASALC EX CLUHI VE DIVECTOR Bev. 07/2012	

Maine Democrats

2076222657 >>



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

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

INDEPENDENT EXPENDITURE REPORT - SPECIAL ELECTION SD 19

STATE OF	Maine	· · · · · · · · · · · · · · · · · · ·
COUNTY OF	Kennebec	
concert with, or	s insted in the attached rep	, being duly sworn, attests that he/she made each of port independently, and not in cooperation, consultation, or on of, the candidates named in the report or the authorized
	_	M.e. april
		(Signature of Affiant)
Man 9	ne, this 2nd day of	ssion Expires 2/15/2018

Rov. 07/2013

Independent Expenditure Report - Special Election SD 19

Čal- du		Page of Schedule B-IE-1 onl
Schedule B-IE-		
CANDIDATE(S) SUPPORTE Please list all candidates that were the subjects of ind If more than one candidate was the subject of all 		
 If more than one candidate was the subject of the experimentation of the exper	enditure, allocate the expe	nditure among the
Office sought by candidate (including district # or county)	Indicate whether expenditure was mad in support of or in opposition to the	
D-19 Eloise Vitelli	Support	candidate
Total expenditures for all candidates a mount should equal the total independent expenditures listed as a	this reporting period. thedule B-IE-2, Line C. \Rightarrow	

2072876775 P 4/4

Independent Expenditure Report - Special Election SD 19

Schedule B-IE-2

Page _____ of _____ (Schedule B-IE-2 only)

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

· · · · ·	Expenditure Types
LIT MH\$	Printing and graphics (flyers, signs, palmcards, etc.) PRT Print media ads only (newspapers
PHO	Phone banks, automated telephone calls
POS	Polling and research survey Postage for U.S. Mail and mail box fees
	A CONTRACT OF A CO

Date of					
Date of expenditure	Payee, address, zip code	Expenditure type		Amount	
8/1/13	CD2 (on sulting 9 Milcast >1 Drived New Gloucester, ME 04260	RAD	CO)	\$12,487	
		τ			
			·		
/					
		es for this page		\$12,487.00	
······································	B. Total for all other Schedule B-IE-	•	⇒		
his amount sho	C. Total independent expenditures for this reporting uid equal the total amount for all candidates listed on S	period (A+B). Chedule B-IE-1.	⇒ (H2, 487.00	

ACTIVITY REPORT

TIME : 08/03/2013 09:00 NAME : ETHICS COMMISSION FAX : 2072876775 TEL : 2072874179 SER.# : BROK3J751924

NO.	DATE	TIME	FAX NO./NAME	DURATION	PAGE(S)	RESULT	COMMENT	
	08/02	16:55		58	04	OK	RX	ECM

BUSY: BUSY/NO RESPONSE NG : POOR LINE CONDITION / OUT OF MEMORY CV : COVERPAGE POL : POLLING RET : RETRIEVAL PC : PC-FAX

.