	PECIAL ELECTION
SI	ENATE #7
RECEIVED   IE	#2
	Office: 45 Memorial Circle, Augusta, Maine
Maine Ethics Commission	Website: www.maine.gov/ethics Phone: 207-287-4179 Fax: 207-287-6775
INDEPENDENT EXPENDITURE REPORT - SENATE DISTRICT 7	SPECIAL ELECTION
Name of Person/Committee Making Expenditure(s)	C PARTY
Mailing Address PO Box 525%	
City, Zip Code AUGUSTA, ME 04332. Telep	hone 207.622-6233
The requirement to file an independent expenditure report is based on the total election. When the total expenditures per candidate exceeds the threshold an deadline.	or aggregate amount spent per candidate for the mount, a report must be filed by the appropriate
Please check the appropriate box for the report you are filing and complete the r	ofarized affidavit and altached schedulos
Reports must be filed on weekends and holidays if that is when they are due by The Commission must receive the signed original report within 5 days after the f	
Is this an amendment to a previously filed report? 🗌 Yes 🕅 No Date	report was filed:
TOTAL INDEPENDENT EXPENDITURES OVER \$100 PER CANDIDATI	
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:	nan ne
24-Hour Report	Within 24 hours of exceeding \$100
I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT /	AND COMPLETE.

M. L. MAN Signature of PAC or Party Treasurer, or Other Authorized Person Making Expenditure(s)

,

<u>4126111</u> Date



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# INDEPENDENT EXPENDITURE REPORT - SENATE DISTRICT 7 SPECIAL ELECTION

### AFFIDAVIT

STATE OF	MAINE
COUNTY OF	KENNEBEL

I, <u>MARY ERW CASALE</u>, being duly sworn, attest that I made each of the expenditures listed in the attached report independently, and not in cooperation, consultation, or concurt 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 26th day of ATRIL 2011

(Notary Public/Attorney at Law) My commission expires: 10/18/2.014

Rev. 4/5/2011

# 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 exponded this reporting period for each candidate
SD7	Cynthia A. Dill	Support	\$397,49
ν	Cynthia A. Dill Cynthia A. Dill	Support Support	\$397,49 \$4,325.00
	-		
			·····
This a	Total expenditures for all a mount should equal the total independent expenditures	candidates this reporting period. Iisted on Schedule B-IE-2, Line C. ⇒ ¬	\$4,-222.49

#### 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.

	Expe	nditure	Types	111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
PHO Phone POL Polling	HS Mail house (all services purchased) RAD Radio ads, production costs   IO Phone banks, automated telephone calls TVN TV or cable ads, production costs   DL Polling and research survey WEB Website design, registration; hosting; maintenance etc.						
Date of expenditure				Expenditure type		Алюцпt	
4/14/u	U.S. Postal Service 40 Western Ave. Augusta,	ME	04330	POS		\$39	7.49
420/11	Ourso Beychot, Inc. 352 Napoleon St. Baton Rouge Louisiana Ourso Beychok, Inc. 352 Napoleon St. Boton Rouge, Louisiana	70{	302	MHS		\$3,0	150,00
4ladu	Ourso Beychok, Inc. 352 Napoleon St. Boton Rouge, Louisinna	<u>7080</u>	a	Pos		\$3-	150,00 75,00
					-		
		·				, , , , , , , , , , , , , , , , , , ,	
			A. Expend	itures for this pag	e⇒	\$4,-	722,48
7 Marine	B. Total for	r all oth	er Schedule B	-IE-2 pages (if any	/) ⇒		
This	C. Total independent expe amount should equal the total amount for	nditure: all cano	s for this repoi lidates listed o	ting period (A+B) n Schedule B-IE-1		\$4, 72.	2,49

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