ETHICS COMMISSION



STATE OF MAINE COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station Office: 242 State Street Augusta, Maine 04333 Tel: (207) 287-4179 Fax: (207) 287-6775 www.maine.gov/ethics



2007 SPECIAL ELECTION IN HOUSE DISTRICT 83 CAMPAIGN FINANCE REPORT OF INDEPENDENT EXPENDITURES

Name of Person/Committee Making Expend	liture(s) MAINE	REPUBLICA	PARTY
Mailing Address 9 HIGGINS 57	REGT		
City, Zip Code AUGUSTA, ME	04330	_ Telephone _ Zo	7-622-6247

INSTRUCTIONS

Complete the notarized affidavit and attached schedules. Please check the appropriate box for the report you are filing. Please see previous page for reporting requirements.

INDEPENDENT EXPENDITURES OF MORE THAN \$250 PER CANDIDATE

1000

Independent expenditures of more than \$250 per candidate must be reported to the Commission within 24 hours of making the expenditure. Please be aware that under the Commission's Rules making an expenditure includes placing an order for a good or service or making a promise or agreement that a payment will be made.

Report of Independent Expenditure over \$250

INDEPENDENT EXPENDITURES OF MORE THAN \$100 AND UP TO \$250 PER CANDIDATE

Special Election

	Reporting Period	Filing Deadline		
×	Through May 31	May 31		
	After May 31	Within 24 Hours		

OTHER

Amendment to Earlier Report Dated: _____

Other(specify):_

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

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

Form IE (Rev. 4/07)

STATE OF MAINE **COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES**

Mail: 135 State House Station Office: 242 State Street Augusta, Maine 04333 Tel: (207) 287-4179 Fax: (207) 287-6775 Web site: www.maine.gov/ethics

INDEPENDENT EXPENDITURES

AFFIDAVIT

MAIN STATE OF

1.1

KENNE3EC COUNTY OF __

____, being duly sworn, attests that he/she 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 30 day of MAY2007.

#6964

(Notary Public/Attorney at Law)

Page____ of _____ (Schedule B-IE-1 only)

ч

Schedule B-IE-1

CANDIDATE(S) SUPPORTED/OPPOSED

Please list all candidates that were the subject of independent expenditures.

1.1

 If more than one candidate was the subject of the expenditure, allocate the expenditure among the candidates.

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
PENNY	MORREL	 SUPPORT	3271.50 1625.00
PENNY	MORRELL	SUPPORT SUPPORT	1625.00
, an u			
1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -		 	

 $\sim - <$

Page_ (Schedule B-IE-2 only)

1

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 purpose of the expenditure.

	Expanditure Types			
LIT	Campaign literature (printing and graphics)	PRT	Print media ads	
MHS		RAD	Radio ads, production costs	
PHO		TVN	TV or cable ads, production costs	
POL		WEB	Internet and e-mail	
POS	S Postage for U.S. Mall	ОТН	Other (include description)	

Date of expenditure	Payee, address, zip code	Expenditure Type	1	Amount
5/29/07	GOP Mail, 95 EDDY ROAD SUITE 101, MANCHESTER, NH 03102 FLS CONNECT, 7300 HUPSON BLUD SUITE 270, St. Paul, MN 55128	MHS	\checkmark	3271,50
5/29/07	FLS CONNECT, 7300 HUDSON BLUD SUITE 270, St. Paul, MN 55128	MHS POL	V	1625.00
	f			
				-
		i		
	ge ⇒	489650		
	y)⇒	489650 V- 4896.50		
	3)⇒	4896.50		

Form IE/B-IE-2 (Rev. 4/07)