



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES
 Mail: 135 State House Station, Augusta, Maine 04333
 Office: 45 Memorial Circle, Augusta, Maine

2011 Special Election House District 11
 Campaign Finance Report

RECEIVED
 SEP 27 2011
 Maine Ethics Commission

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

For Political Action Committees
 Please complete ALL entries.

| | | | | |
|------------------------|-------------------------------------|------------------|--------------|--|
| NAME OF COMMITTEE | House Democratic Campaign Committee | | | <input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT |
| STREET | P.O. Box 2021 | | | |
| CITY AND ZIP CODE | Augusta, ME 04338 | TELEPHONE NUMBER | 207-590-0259 | |
| E-MAIL | Seanchristophersmith@gmail.com | | | |
| NAME OF TREASURER | Stephen Von Vogt | | | <input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT |
| MAILING ADDRESS STREET | P.O. Box 15087 | | | |
| CITY AND ZIP CODE | Portland, ME 04112 | TELEPHONE NUMBER | 207-828-1414 | |
| E-MAIL | svovogt@mainemai.nccomposites.com | | | |

| Type of Report | Due Date | Dates of Report Period |
|--|--------------------|-------------------------------------|
| <input type="checkbox"/> 11-Day Pre-Election | August 5, 2011 | Start of Campaign* — August 2, 2011 |
| <input checked="" type="checkbox"/> 42-Day Post-Election | September 27, 2011 | August 3, 2011 — September 20, 2011 |

*Report only those Contributions and Expenditures that pertain to the Special Election for House District 11

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE, CORRECT, AND COMPLETE.

Sean C. Smith

 Treasurer's Signature

9/26/11

 Date

PAC Name _____

Page ____ of ____
Schedule A only

**SCHEDULE A
CASH CONTRIBUTIONS**

- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For cash contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor separately.

| DATE RECEIVED | CONTRIBUTOR'S NAME, ADDRESS, ZIP | OCCUPATION AND EMPLOYER | TYPE (use key code) | AMOUNT |
|--|---|---|---------------------|------------|
| 8/9/11 | Unitemized | | 1 | \$ 240.00 |
| 8/9/11 | Terry Morrison 18 B Street South Portland, ME 04106 | Legislator State of Maine | 1 | \$ 75.00 |
| 8/9/11 | Craig Brown 2 Seal Cove Ln Cap. Elizabeth, ME 04107 | Executive Director Common Dreams | 1 | \$ 100.00 |
| 8/9/11 | Thomas Mikula 6 Arrow Point Rd. Cap. Elizabeth, ME 04107 | Information Requested | 1 | \$ 100.00 |
| 8/9/11 | Maine Main Forward PAC 299 Ferry Rd. Saco, ME 04102 | | 3 | \$ 100.00 |
| 8/9/11 | William Robinson 52 Kethh Cove Rd. Cap. Elizabeth, ME 04107 | Media Consultant New Media Firm | 1 | \$ 100.00 |
| 8/9/11 | Kate Simons 12 Smith St. #1 Portland, ME 04101 | Campaign Manager Progress For Congress | 1 | \$ 100.00 |
| Total cash contributions (this page only) => (combined totals from all Schedule A pages must be listed on Schedule F) | | | | \$ 1015.00 |

Key Codes:

- 1 = Individuals
- 2 = Commercial Source
- 3 = Political Action Committees

- 4 = Party Committee
- 5 = Candidate Committees
- 6 = Unitemized Contributions of \$50 or less

Duplicate as needed.

PAC Name _____

Page ____ of ____
Schedule A Only

**SCHEDULE A (continued)
CASH CONTRIBUTIONS**

| DATE RECEIVED | CONTRIBUTOR'S NAME, ADDRESS, ZIP | OCCUPATION AND EMPLOYER | TYPE (use key code) | AMOUNT |
|---|--|---|---------------------|------------|
| 8/9/11 | Murtha Palmer 7 Pilot Point Rd. Cap Elizabeth, ME 04107 | Information Requested | 1 | \$ 200.00 |
| 8/9/11 | Andrew Ruth-Wells 91 Williams Rd. Georgetown, ME 04548 | Legislative Aide House Democratic Office | 1 | \$ 200.00 |
| 9/9/11 | Cynthia Dill 1227 Shea Rd. Cap Elizabeth, ME 04107 | Attorney Self-Employed | 1 | \$ 200.00 |
| 8/25/11 | Stephen Simonds 18 Bentwood Rd. Cap Elizabeth, ME 04107 | Retired | 1 | \$ 200.00 |
| 8/9/11 | Paul F de Buchholz 18 Cotton Farms Rd. Cap Elizabeth, ME 04107 | General Manager IDEXX | 1 | \$ 250.00 |
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| Total cash contributions (this page only) => | | | | \$ 1050.00 |
| <i>(combined totals from all Schedule A pages must be listed on Schedule F)</i> | | | | |

Key Codes:

1 = Individuals

2 = Commercial Source

3 = Political Action Committees

4 = Party Committee

5 = Candidate Committees

6 = Unitemized Contributions of \$50 or less

Duplicate as needed.

6/21/11

PAC Name _____

Page ___ of ___
Schedule A-1 Only

**SCHEDULE A-1
IN-KIND CONTRIBUTIONS**

- In-kind contributions are goods and services (including facilities) that a committee received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the committee by others if the committee does not expect to reimburse the person who made the purchase.
- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "Information requested" for the occupation and employer.
- For cash contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor separately.

| DATE RECEIVED | CONTRIBUTOR'S NAME, ADDRESS, ZIP | OCCUPATION AND EMPLOYER | DESCRIPTION (of goods, services, facilities, or discounts received) | TYPE (use key code) | VALUE (estimated fair market value) |
|--|----------------------------------|-------------------------|--|------------------------|--|
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| Total in-kind contributions (this page only) ⇒ <i>(combined totals from all Schedule A-1 pages must be listed on Schedule F)</i> | | | | | |

Key Codes:

- | | |
|---------------------------------|--|
| 1 = Individuals | 4 = Party Committee |
| 2 = Commercial Source | 5 = Candidate Committees |
| 3 = Political Action Committees | 6 = Unitemized Contributions of \$50 or less |

Duplicate as needed.

PAC Name _____

Page ____ of ____
Schedule B Only

**SCHEDULE B
EXPENDITURES TO SUPPORT OR OPPOSE**

- Enter all expenditures, including cash contributions from this committee, made to support or oppose a candidate, political action committee, ballot question committee, or party committee.
- Enter all expenditures made to support or oppose a ballot question, referendum, or citizen initiative, including those in signature-gathering phase.
- Enter the name of the candidate, ballot question, or committee supported or opposed by the expenditure and indicate whether the expenditure was made in support or opposition.

If a single expenditure is made to support or oppose multiple candidates, committees, or ballot questions, the expenditure must be itemized by the amount spent per candidate, committee, or question, not as a single expenditure, and each candidate, committee, or ballot question must be identified.

| EXPENDITURE TYPES | | | |
|-------------------|--|-----|---|
| CON | Contribution to candidate, party or committee | POL | Polling and survey research |
| CNS | Campaign consultants | POS | Postage for U.S. Mail and mail box fees |
| EQP | Equipment (office machines, furniture, cell phones) | PRO | Professional services |
| FND | Fundraising events | PRT | Print media ads only (newspapers, magazines, etc.) |
| FOD | Food for campaign events, volunteers | RAD | Radio ads, production costs |
| LIT | Printing and graphics (flyers, signs, palmcards, t-shirts, etc.) | SAL | Campaign workers' salaries and personnel costs |
| MHS | Mail house (all services purchased) | TRV | Travel (fuel, mileage, lodging, etc.) |
| OFF | Office rent, utilities, phone and internet services, supplies | TVN | TV or cable ads, production costs |
| OTH | Other | WEB | Website design, registration, hosting, maintenance, etc.) |
| PHO | Phone banks, automated telephone calls | | |

Only these expenditure types require a remark: CNS, OTH, PRO and SAL.

| DATE | PAYEE'S NAME AND ADDRESS | REMARKS | TYPE | AMOUNT |
|---------|---|---------|------|-----------|
| 8/12/11 | Xpress Copy 160 Fore St. Portland, ME 04112 | | LIT | \$ 152.00 |
| | Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/> : Kim Monaghan - Dennis | | | |
| 8/12/11 | Broadcast Solutions 13806 Goosefoot Terr. Rockville, MD 20850 | | PHO | \$ 262.40 |
| | Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/> : Kim Monaghan - Dennis | | | |
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| | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> : | | | |
| | | | | |
| | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> : | | | |

Total expenditures this page only =>
(combined totals from all Schedule B pages must be listed on Schedule F)

\$ 2114.40

PAC Name _____

Page ____ of ____
Schedule B Only

SCHEDULE B (continued)
EXPENDITURES TO SUPPORT OR OPPOSE

| DATE | PAYEE'S NAME AND ADDRESS | REMARKS | TYPE | AMOUNT |
|------|---|---------|------|--------|
| | | | | |
| | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> : | | | |
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| | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> : | | | |
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| | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> : | | | |
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| | Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> : | | | |

Total expenditures this page only =>
(combined totals from all Schedule B pages must be listed on Schedule F)

PAC Name _____

Page ____ of ____
Schedule B-1 Only

**SCHEDULE B - 1
OPERATING EXPENSES**

List all expenditures made to a single payee or creditor aggregating in excess of \$50 for this election and that were made during this reporting period. Expenditures of \$50 or less for this election may be aggregated and listed as a lump sum.

| EXPENDITURE TYPES | | | |
|-------------------|--|-----|---|
| CON | Contribution to candidate, party or committee | POL | Polling and survey research |
| CNS | Campaign consultants | POS | Postage for U.S. Mail and mail box fees |
| EQP | Equipment (office machines, furniture, cell phones) | PRO | Professional services |
| FND | Fundraising events | PRY | Print media ads only (newspapers, magazines, etc.) |
| FOD | Food for campaign events, volunteers | RAD | Radio ads, production costs |
| LIT | Printing and graphics (flyers, signs, palmcards, t-shirts, etc.) | SAL | Campaign workers' salaries and personnel costs |
| MHS | Mail house (all services purchased) | TRV | Travel (fuel, mileage, lodging, etc.) |
| OFF | Office rent, utilities, phone and internet services, supplies | TVN | TV or cable ads, production costs |
| OTH | Other | WEB | Website design, registration, hosting, maintenance, etc.) |
| PHO | Phone banks, automated telephone calls | | |

Only those expenditure types require a remark: CNS, OTH, PRO and SAL.

| DATE | PAYEE NAME & ADDRESS | TYPE | REMARK (if the expenditure type requires a remark, describe all goods and services purchased) | AMOUNT |
|--|----------------------|------|--|--------|
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| Total expenditures (this page only) => (combined totals from all Schedule B-1 pages must be listed on Schedule F) | | | | |

PAC Name _____

Page ____ of ____
Schedule C Only

SCHEDULE C LOANS AND REPAYMENTS

List all new and continuing loans that were unpaid at any time during this reporting period. If a loan amount is forgiven, the amount forgiven must also be entered as a contribution on Schedule A.

| | COLUMN 1 | COLUMN 2 | COLUMN 3 | COLUMN 4 | COLUMN 5 |
|--------------------------------------|--|--|--|---|--|
| LENDER'S NAME AND ADDRESS | LOAN BALANCE AT BEGINNING OF PERIOD | ACTIVITY THIS PERIOD (report amount and date) | | | LOAN BALANCE AT END OF PERIOD (1+2) - 3 - 4 |
| | | AMOUNT LOANED THIS PERIOD | AMOUNT REPAYD THIS PERIOD | AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also) | |
| | | DATE | DATE | DATE | |
| | | AMOUNT | AMOUNT | AMOUNT | |
| | | DATE | DATE | DATE | |
| | | AMOUNT | AMOUNT | AMOUNT | |
| | | DATE | DATE | DATE | |
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| | | DATE | DATE | DATE | |
| | | AMOUNT | AMOUNT | AMOUNT | |
| Totals for each column ⇒ | | Enter on Schedule F, Line 3 | Enter on Schedule F, Line 7 | | Enter on Schedule F, Line 14 |

PAC Name _____

Page ____ of ____
Schedule D Only

**SCHEDULE D
UNPAID DEBTS AND OBLIGATIONS**

- A debt or obligation is incurred if a committee places an order for a good or service without making a payment; makes a promise or agreement to pay for a good or service; signs a contract for a good or service; or receives delivery of a good or service for which the committee has not paid.
- This schedule is a list of all debts and obligations of the committee as of the end of this reporting period. When the obligation has been paid, the expenditure (i.e., the actual payment) must be reported on Schedule B or B-1.
- If the committee has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- If obligations from a previous campaign finance report still remain unpaid, you will need to continue to report them on this schedule until they have been paid in full.

| DATE OF OBLIGATION | CREDITOR'S NAME AND ADDRESS | PURPOSE | AMOUNT |
|---|-----------------------------|---------|--------|
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| Total unpaid debts and obligations (this page only) => <i>(combined totals from all Schedule D pages must be listed on Schedule F)</i> | | | |

PAC Name _____

**SCHEDULE F
SUMMARY SCHEDULE**

CASH ACTIVITY

| Receipts | Total for this Period |
|---|-----------------------|
| 1. Cash Contributions (Schedule A) | \$ 2065.00 |
| 2. Other Cash Receipts (interest, etc.) | |
| 3. Loans (Schedule C) | |
| 4. Total Receipts (lines 1 + 2 + 3) | \$ 2065.00 |
| Expenditures | Total for this Period |
| 5. Expenditures to Support or Oppose (Schedule B) | \$ 414.40 |
| 6. Operating Expenditures (Schedule B-1) | |
| 7. Loan Repayment (Schedule C) | |
| 8. Total Payments (lines 5 + 6 + 7) | \$ 414.40 |

CASH SUMMARY

| | Total for This Period |
|---|-----------------------|
| 9. Cash Balance at Beginning of Period | \$ 0.00 |
| 10. Plus Total Receipts This Period (line 4 above) | \$ 2065.00 |
| 11. Minus Total Payments This Period (line 8 above) | \$ 414.40 |
| 12. Cash Balance at End of Period | \$ 1650.00 |

OTHER ACTIVITY

| | Total for This Period |
|--|-----------------------|
| 13. In-Kind Contributions (Schedule A-1) | |
| 14. Total Loan Balance at End of Period (Schedule C) | |
| 15. Total Unpaid Debts at End of Period (Schedule D) | |