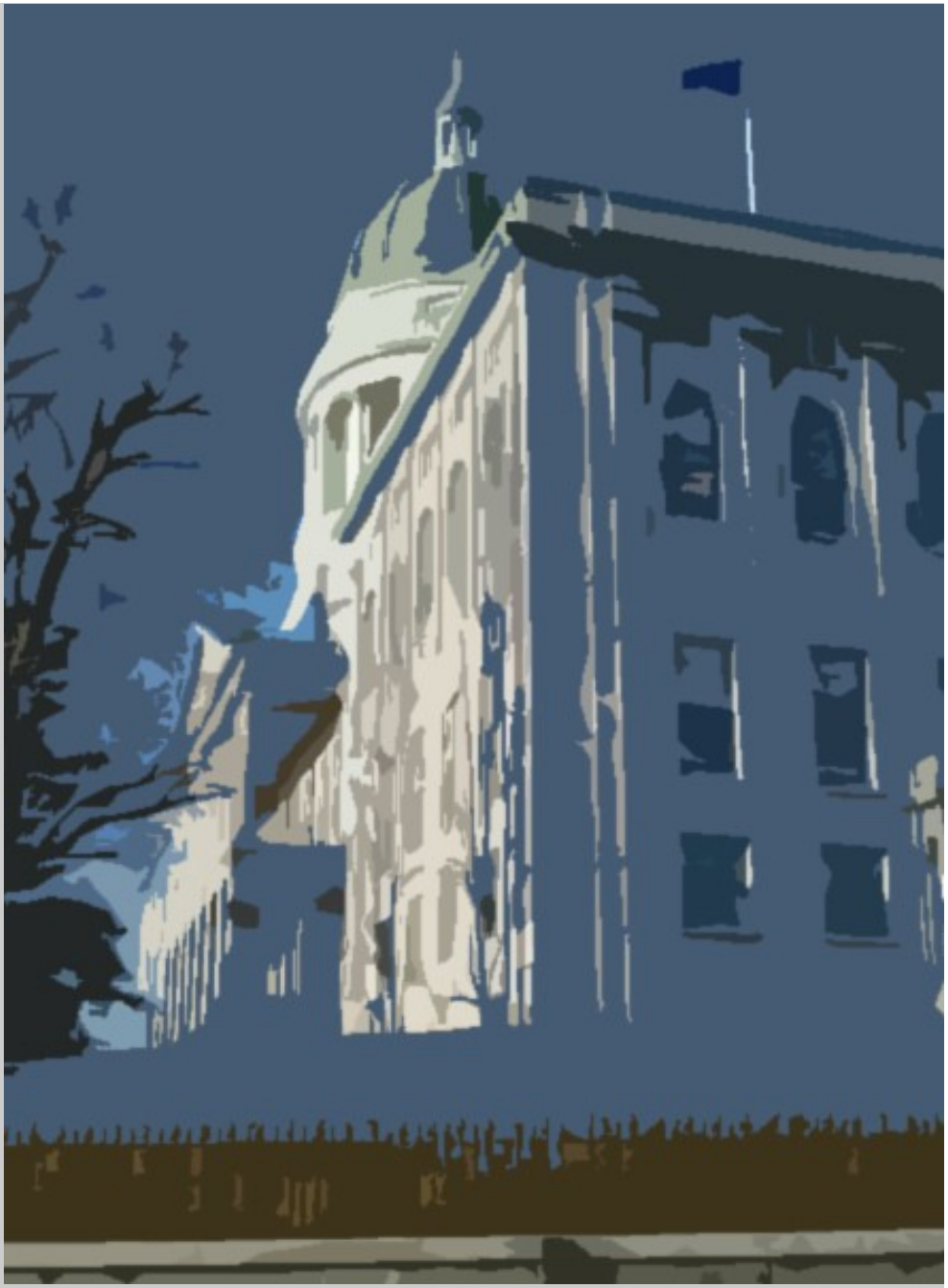
October 2013

2014 MCEA Candidates
Getting Started Packet

Forms, Instructions and filing requirements



Commission on Governmental Ethics and Election Practices

www.maine.gov/ethics

Mailing: 135 State House Station, Augusta, Maine 04333
Location: 45 Memorial Circle, Augusta, Maine
Phone: 207-287-4179
FAX: 207-287-6775

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES
Mail: 135 State House Station, Augusta, Maine 04333-0135
Office: 45 Memorial Circle, Augusta, Maine

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

2014 REGISTRATION MATERIALS

FOR MAINE CLEAN ELECTION ACT CANDIDATES

This packet contains the forms you will need to register with the Commission and to participate in the Maine Clean Election Act. The Commission staff is available to help you with any questions about running as a Maine Clean Election Act (MCEA) candidate.

COMPLETE THESE FORMS:

Candidate Registration Every candidate must register with the Commission before accepting any campaign contributions or making any campaign expenditures. Please complete and sign the enclosed registration form and return it to the Commission.

Appoint a Treasurer When you register, you will have to name your campaign treasurer. The MCEA prohibits candidates from serving as treasurer or deputy treasurer. However, you may register and serve as your own treasurer for up to 14 days before appointing someone else.

Declaration of Intent (DOI) Please complete and file the DOI form when you register. Qualifying contributions received more than 5 business days before the DOI is filed with the Commission will not count toward the eligibility requirements. You can begin to collect qualifying contributions on January 1, 2014.

Maine Code of Fair Campaign Practices (optional) Please review the Code and return the signed form if you want to subscribe. Subscribing to the Code is voluntary. The Commission is not authorized to take action against candidates who violate the Code.

Vendor Form You must complete this form to receive MCEA funds. Please do this when you register or at your earliest convenience and submit it to the Commission.

Authorization Agreement for Direct Deposit Services (optional) If you prefer to receive your MCEA payments by direct deposit (EFT) rather than by check, complete this form, attach a voided check or an authorization letter from your bank, and submit them to the Commission. Most candidates prefer EFT because they can access campaign funds faster.

OTHER REQUIREMENTS:

Campaign Bank Account You must have a separate bank account for your campaign funds, *i.e.*, your seed money contributions and your MCEA payments. You cannot commingle seed money or MCEA funds with personal or business funds. Remember that cancelled checks (or copies) and monthly statements are records that you must keep for three years.

MCEA Expenditure Guidelines All public funds must be spent on campaign-related expenditures in accordance with guidelines established by the Commission. Violations of this requirement may result in civil and criminal penalties. Please familiarize yourself with the guidelines (copy included in this packet).

Seed Money Prior to MCEA certification, you may raise and spend only "seed money contributions." A seed money contribution cannot exceed $100 and must come from individuals only. Each family member may make a seed money contribution, provided that the money is from their personal funds. Seed money contribution limits are $500 for House candidates and $1,500 for Senate candidates. All cash and in-kind (goods and services) contributions count toward the limit. A seed money report must be filed whether you raised or spent any seed money.

Many questions can be answered by referring to the Commission's website, www.maine.gov/ethics, or the *2014 Candidate's Guide*. You can also call the Ethics Commission staff with your questions at 287-4179. Please ask for a candidate registrar.

Continued on back

Qualifying Contributions

To become eligible to receive MCEA funds, you must collect a minimum number of qualifying contributions during the qualifying period.

Qualifying Period and Required Number

	ALL CANDIDATES: DEMOCRATIC, GREEN-INDEPENDENT, REPUBLICAN, AND UNENROLLED
QUALIFYING PERIOD	January 1 to April 22, 2014
REQUIRED NUMBER OF QUALIFYING CONTRIBUTIONS	House Candidates – 60
	Senate Candidates – 175

What is a Qualifying Contribution

Qualifying contributions are donations of $5 or more made with the personal funds of individuals who are registered to vote in your district. They do not have to be enrolled in the same political party as you.

Qualifying contributions maybe made by:

- a personal check payable to the Maine Clean Election Fund (MCE Fund);
- cash, but only if the contributor signs a money order provided by the campaign in the same amount as the cash contribution. If the contributor prints their name on the money order, please ask them to sign it, too. If the money order is not signed, it will not be accepted and counted as a qualifying contribution; or
- a debit or credit card payment to the MCE Fund using the Commission's online contribution website (www.maine.gov/online/ethics/cleanelection).

Receipt and Acknowledgment Form (R&A Form) and Voter Verification

For qualifying contributions made by check or money order:

- Each contributor must fill out and sign the R&A form.
- The contributors listed on a single form should be from the same city or town.
- Everyone, including candidates, circulating the forms and collecting qualifying contributions and signatures must complete and sign the circulator section of the form.
- You must bring these forms to the municipal clerks in your district to verify that the contributors are registered voters at the address listed on the form.

For qualifying contributions made by debit or credit card on the Commission's website:

- Contributors do not sign a paper form because they sign electronically when they make their contribution.
- The online system automatically verifies the voter registration of online contributors.
- If the system is unable to verify the voter registration, the campaign must download and print the R&A forms for the unverified contributors and bring these forms to the town clerks for voter verification.

Requesting Certification

Requests for certification must be received by the Ethics Commission by 5:00 p.m. on the last day of the qualifying period. For a checklist of documents that must be submitted, please refer to the Request for Certification form included in this packet. Requests for certification will not be granted if the qualifying contributions and verified Receipt and Acknowledgement forms are not submitted by the deadline of the qualifying period.

Qualifying Contributions and R & A Forms

You must submit at least the minimum number of valid qualifying contributions along with the R&A forms verified by municipals registrars. You do not need to submit R&A forms for qualifying contributions verified online.

Alphabetical List

You must submit an alphabetical list of all individuals who made a qualifying contribution by check, money order and online. The list includes their name and town or city where they reside.

Seed Money Report

Before you can be certified, you must file a seed money report.

2014 Election Year

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2014 CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Commission.

Is this an amendment? ☐ **Yes** ☐ **No**

1.	**CANDIDATE INFORMATION**	
Are you running as a (check one): ☐ **Maine Clean Election Act candidate** ☐ **traditionally financed candidate**		
Title ☐ Ms. ☐ Mrs. ☐ Mr. ☐ Dr. ☐ Honorable	Party affiliation	Office sought
Name: First / MI or Middle Name / Last		District or County
Mailing address		Home Phone
City, zip code		Cell Phone
E-mail	Fax	Work Phone

2.	**TREASURER INFORMATION**	
Name: First / MI or Middle Name / Last		Phone (home)
Mailing address		Phone (work)
City, zip code	E-mail	Fax

DESIGNATION OF TREASURER: A candidate for office must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Commission the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. A MCEA candidate may serve as treasure for no more than 14 days following the date of registration. (21-A MRSA §§ 1013-A and 1125(12-A))

2A.	**DEPUTY TREASURER INFORMATION**	
Name: First / MI or Middle Name / Last		Phone (home)
Mailing address		Phone (work)
City, zip code		E-mail

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer and notify the Commission no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. A MCEA candidate may serve as deputy treasure for no more than 14 days following the date of registration. (21-A MRSA §§ 1013-A and 1125(12-A)) (21-A MRSA § 1013-A (1)(A)(1))

3.	AUTHORIZED AGENT INFORMATION	
Name	Phone	Email
Name	Phone	Email

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4.	POLITICAL COMMITTEE INFORMATION
Name	Phone
Address of campaign headquarters	City, zip code

DESIGNATION OF POLITICAL COMMITTEE (optional): The candidate may form a political or campaign committee. Within 10 days of forming the committee and before accepting contributions, making expenditures or incurring obligations, the candidate must:

- appoint a treasurer (the candidate may have only one treasurer who is listed in Section 2) and
- register the committee and its officers, if any are appointed, with the Commission. (21-A MRSA § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name	Title	Phone
Mailing address	City, zip code	E-mail

Name	Title	Phone
Mailing address	City, zip code	E-mail

5. CERTIFICATION

I, _____, certify that the information in this registration is true,
(Print Candidate's Full Name)
accurate and complete.

Signature of Candidate _____ Date _____

6. FOR COUNTY CANDIDATES ONLY

REPORTING EXEMPTION REQUEST: A candidate for county office may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for his or her campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Commission.

STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.

Signature of county candidate _____ Date _____

Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____.

Signature of Notary/Attorney-at-law _____ My commission expires _____
(Seal is optional) (Date)

REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Commission no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.

Sworn Falsification is a Class D crime. (17–A MRSA § 453)

2014 Election Year

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2014 DECLARATION OF INTENT

To Seek Certification as a Maine Clean Election Act Candidate

Candidate's Name: _____
(Please Print)

I hereby declare my intent to become certified as a Maine Clean Election Act candidate and to comply with the requirements of the Maine Clean Election Act. I authorize the Commission to conduct a financial audit of my campaign, including but not limited to financial records and account(s). I affirm the following in support of this Declaration of Intent:

- That I am seeking certification as a Maine Clean Election Act candidate.
- That I understand that any qualifying contribution I collected more than five business days before filing this Declaration of Intent with the Commission will not be counted toward the eligibility requirement.
- That I have raised and spent only seed money contributions since becoming a candidate, and that I will continue to comply with applicable seed money restrictions.
- That I will deposit and maintain all Maine Clean Election Act funds I receive in an account to be used solely for campaign purposes, and that all my payments of Maine Clean Election Act funds will comply with the Commission's expenditure guidelines.
- That I will obtain and keep campaign records required by the Maine Clean Election Act and by the Commission's rules and policies.
- That I have received or will obtain from the Commission the current Candidate Guidebook containing the Commission's policies.
- That I have elected to participate in this voluntary public financing program, and understand that it is my responsibility to review and to comply with the Maine Election Law, and the Commission's rules and policies.

I certify that the above affirmations are true, correct, and complete to the best of my knowledge.

_____ _____
Date Candidate's Signature

2014 Election Year

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2014 MAINE CODE OF FAIR CAMPAIGN PRACTICES

(Optional under 21-A M.R.S.A. § 1101(2))

I shall conduct my campaign and, to the extent reasonably possible, insist that my supporters conduct themselves, in a manner consistent with the best Maine and American traditions, discussing the issues and presenting my record and policies with sincerity and candor.

I shall uphold the right of every qualified voter to free and equal participation in the election process.

I shall not participate in and I shall condemn defamation of and other attacks on any opposing candidate or party that I do not believe to be truthful, provable and relevant to my campaign.

I shall not use or authorize and I shall condemn material relating to my campaign that falsifies, misrepresents or distorts the facts, including, but not limited to, malicious or unfounded accusations creating or exploiting doubts as to the morality, patriotism or motivations of any party or candidate.

I shall not appeal to and I shall condemn appeals to prejudices based on race, creed, sex or national origin.

I shall not practice and I shall condemn practices that tend to corrupt or undermine the system of free election or that hamper or prevent the free expression of the will of the voters.

I shall promptly and publicly repudiate the support of any individual or group that resorts, on behalf of my candidacy or in opposition to that of an opponent, to methods in violation of the letter or spirit of this code.

I, the undersigned candidate for election to public office in the State of Maine, hereby voluntarily endorse, subscribe to and solemnly pledge to conduct my campaign in accordance with the above principles and practices.

Date	Candidate's Signature
Office Sought and District	Printed Name

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

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2014 Payment Amounts for MCEA Legislative Candidates

Candidate	Primary	General
State Representative, Contested	$1,429	$4,724
State Representative, Uncontested	$486	$1,559
State Senate, Contested	$7,359	$21,749
State Senate, Uncontested	$1,831	$7,177

State of Maine Substitute W-9 & Vendor Authorization Form

Reset Form

Return to:
Maine Ethics Commission
135 State House Station
Augusta, ME 04333-0135
207-287-4179

PURPOSE: To establish or update an account with the State of Maine's accounting system. | This form replaces the IRS W-9 form per the IRS W-9 language; "If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9." | Complete this form if: 1) You will receive payment from the State of Maine, and/or 2) You are a vendor who provides services or goods to the State of Maine.

All items with an asterisk (*) must be completed.

TYPE OF REQUEST*: (Must select one.)

☐ **New Request**

☐ **Change (Choose)** ◯ Legal Name ◯ DBA Name ◯ Payment Address ~~Ordering Address~~ ◯ Contact Info

TAXPAYER ID NUMBER* (TIN) ***(Provide ONE only)***

Candidate's Social Security Number (SSN) ☐ - ☐ - ☐ OR Committee's Federal Employer ID Number (FEIN) ☐ - ☐

Organization Type * choose ONE ◯ Individual/Candidate OR ◯ ~~Company~~ **Committee with FEIN**

Classification * choose ONE ☐ Individual ~~Sole Proprietorship~~ ~~Nonresident Alien~~ | ~~Corporation~~ ~~Foreign (W8 required)~~ ~~Partnership~~ ~~Trust~~ ~~State Gov't~~ ~~Other Gov't~~ ☐ **Other**

LEGAL NAME ***(Must provide: Legal name filed with IRS tied to the ID number, SSN=first & last name/FEIN=business name)***

Legal Name* _____ Alias/DBA MCEA CAMPAIGN ACCOUNT

Other Info Completed by Ethics or DAFS

Vendor Customer Number (if known) VC#/VS# _____

Payment Address* where the check will be sent to

Address _____ C/O _____

City/State/Zip _____ Phone _____

Contact*

Name _____ Phone _____ Ext _____

Email _____ ☐ Send me Email notifications of DD/EFT (requires Direct Deposit/EFT form to be completed)

Physical Address* if different from payment address

Address _____ C/O _____

City/State/Zip _____ Phone _____

Contact*

Name _____ Phone _____ Ext _____

Email _____

Candidate's Signature & Current Date*

Under penalties of perjury, I certify that: 1) The number shown on this form is my correct taxpayer identification number, and ~~2) I am not subject to backup withholding because: (a) I am exempt from backup witholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding,~~ and 3) I am a U. S. citizen or other U. S. person (defined by the IRS). Ref: www.irs.gov

OFFICE USE ONLY — Information on State Agency Submitting Vendor Form — OFFICE USE ONLY

State Agency & SHS #	Agency Contact Person Name & Title	Contact's Phone #
ETHICS, 135 SHS	Cyndi Phillips, Commission Assistant	(207) 287-4179

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INSTRUCTIONS FOR COMPLETING VENDOR FORM

Please submit completed forms to the Ethics Commission, 135 State House Station, Augusta, ME 04333
Please call the Commission with questions: 207-287-4179.

- All candidates must complete this form at the beginning of each election year (cycle). Check "New Request."
- When updating your information during the election cycle, check the appropriate boxes in the "Change" section.
- The taxpayer identification number (TIN) is either the candidate's social security number (SSN) or a federal employer identification number (FEIN) if you obtained one from the IRS for your campaign committee. Do not use the treasurer's SSN.
- "Organization Type" is either "Individual/Candidate" if SSN used or "Committee with FEIN" if FEIN used. "Classification" is either "Individual" if SSN used or "Other" if FEIN used.
- The "Legal Name" is either:
  a. the candidate's name, if the TIN is the candidate's SSN; or
  b. the committee's name, if the TIN is the committee's FEIN.

  The legal name must match the name used to get a SSN or an FEIN, if you have a committee. If the candidate is using a "DBA" committee, the "Legal Name" is still the candidate's. A committee's name can be entered as a "Legal Name" only if a committee has an FEIN.
- If you have designated your treasurer or committee to receive the check(s) or EFT correspondence, enter the address of your treasurer or committee in "Payment Address" and complete the "C/O" as either "c/o [treasure's name]" or "DBA [committee's name]." The address on this form should be the same address on your candidate registration for you, your treasurer or committee. Please notify the Commission if an address change is needed on your registration. (Please note: "Physical Address" section (grayed area) is not required - leave blank.)
- Complete the "Contact" section with the name, email address, and phone number of the person you want the state's accounting staff to contact concerning questions on your vendor information.
- "Candidate's Signature" section includes a new IRS requirement. State vendor forms must meet IRS W-9 requirements if a W-9 is not used. MCEA payments are coded as "non-reportable funds" in the state's accounting system and therefore are not consider as income and subject to withholding. By signing, you are certifying that the TIN number used on this form is correct and that you are a U.S. citizen.
- Sign and date the form. Please hand-deliver or mail the completed original form to the Commission. Faxed or scanned copies cannot be processed.

STATE OF MAINE
ACTIVATION/CHANGE REQUEST FOR DIRECT DEPOSIT / EFT

To: MAINE ETHICS COMMISSION
135 STATE HOUSE STATION
AUGUSTA, ME 04333-0135

We require you to submit a voided check or letter from your bank for account verification.

NEW CHANGE

Circle ONE

Payee's Name*

Contact Person's Name & Phone # (If different from Payee)

Address of Payee (Street/PO, City, State, & Zip)

Email

TIN is required ~ Employer ID No. or Social Security No.

TIN of Payee* EIN SSN

Circle ONE

Vendor Code in the State's Accounting system.

Vendor Code *Include VC or VS*

Vendor Code can be provided by the State Agency.
One Vendor Code (VC/VS) Number per a form.

☐ I authorize the State of Maine to send DD/EFT payment detail to the email address included.

By signing and returning this document, you agree to the following statement:

I, the below signed, authorize you to electronically transfer payments to the account provided below. I/we authorize the Agency to initiate credit entries and debit entries (only for the purposes of correcting an erroneous credit provided that, prior to the debit I/we are notified by the Agency in writing of the reason) to my/our account at the below named financial institution. I/we agree to notify the Agency's offices immediately upon discovery of any errors resulting from transactions under this authorization and to notify the Agency's offices of any changes that may affect these instructions or the Agency's ability to rely upon them. This authorization may be canceled by me/us at any time by notifying the Agency in writing. In authorizing the above services to be provided to me/us, I/we agree to hold the Agency and the State of Maine harmless from any and all loss, cost, damage or expenses I/we may suffer as the result of errors in deposits, credit entries or debit entries caused by persons who are not employees of the Agency or the State of Maine.

OLD Bank Info: *This section is for Changes ~ For New bank set up, please skip to NEW section below.*

Name on Account

Routing # *(Transit/ABA #)*

Name of Financial Institution

Account #

Address of Financial Institution (Street/PO,City, State,Zip & Phone)

Savings Checking

Circle ONE

You MUST notify us of changes to your name, address, & contact info by completing a Vendor Activation/Change form.
Locate our forms at: http://www.maine.gov/osc/forms/index.shtml (Under VENDOR section.)

NEW Bank Info: **New bank info is REQUIRED to be written on this document.*

Name on Account*

Routing # *(Transit/ABA #)*

Name of Financial Institution*

Account # *

Address of Financial Institution* (Street/PO,City, State,Zip & Phone)

Savings Checking

*Circle ONE **

We require you to submit a voided check or letter from your bank for account verification.

Signature of Payee* _____ Date

(Benefit Recipient) or Authorized Agent (not a fill-in, must sign after printing)

INCOMPLETE FORMS WILL NOT BE PROCESSED

AGENCY CONTACT NAME _____ PHONE # _____ SHS # _____ DATE _____

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INSTRUCTIONS FOR COMPLETING REQUEST FOR DIRECT DEPOSIT FORM

Please submit completed forms to the Ethics Commission, 135 State House Station, Augusta, ME 04333
Please call the Commission with questions: 207-287-4179.

- All candidates must complete this form at the beginning of each election year (cycle). Circle "New" at the top right corner of the form.
- When updating your information during the election cycle, circle "Change" at the top right corner of the form.
- "TIN" is the same taxpayer identification number (TIN) you used on your vendor form - either the candidate's social security number (SSN) or a federal employer identification number (EIN or FEIN). Do not use the treasurer's SSN.
- Complete the "Contact Person's Name & Phone" section with the name and phone number of the person you want the state's accounting staff to contact concerning questions on your direct deposit request.
- The "Payment Address" is the same payment address as found on your vendor form.
- If you want your direct deposit/EFT payment detail (correspondence) sent to an email address rather than mailed to you or your treasurer, check the box to the left of the email address you entered.
- Read the authorization statement and check the box.
- Complete the appropriate bank information section:
  a. "NEW Bank Info" if you are completing the form for the first time in the election cycle; and
  b. "OLD Bank Info" and "NEW Bank Info" if you are making a change to your information.

  "Name on Account" is the name you have given the bank for the account and usually is the name that appears on your campaign checks (e.g., "Jones for House", "Mary Jones Senate 2010", "Brad White, DBA Committee to Elect Brad", "Emily Smith c/o Ann Black, Treasurer"). It is <u>not</u> the account <u>holder's</u> name - unless that is the name you gave the account for the bank.
- Attach a voided check or a letter from your bank for account verification which is <u>required</u> by the State Controller's Office for verification.
- Remember to sign and date the form.

2014 Election Year

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2014 FILING SCHEDULE

For Maine Clean Election Act Legislative Candidates

PRIMARY ELECTION: JUNE 10, 2014 **GENERAL ELECTION: NOVEMBER 4, 2014**

TYPE OF REPORT	FILING DEADLINE (BY 11:59 P.M.)	REPORT PERIOD
Seed Money Report* (for party and unenrolled candidates)	April 22, 2014	Date of first seed money contribution – date of certification request For senate candidates who filed a Semiannual Report*: January 1, 2014 – date of certification request
11-Day Pre-Primary	May 30, 2014	End of Seed Money Report – May 27, 2014
42-Day Post-Primary	July 22, 2014	May 28, 2014 – July 15, 2014
42-Day Pre-General	September 23, 2014	July 16, 2012 – September 16, 2014
11-Day Pre-General	October 24, 2014	September 17, 2014 – October 21, 2014
42-Day Post-General	December 16, 2014	October 22, 2014 – December 9, 2014

*PLEASE NOTE: Senate candidates collecting more than $500 in seed money contributions in 2013 must file a 2014 January Semiannual campaign finance report by 11:59 p.m. on January 15, 2014 showing all seed money contributions and

24-HOUR REPORTS

24-HOUR REPORT PERIOD	WHAT TO REPORT	WHEN TO FILE
For Primary: May 28 – June 9, 2014 For General: October 22 – November 3, 2014	Any single expenditure of $1,000 or more. Orders placed with or obligations made to vendors for goods or services are considered expenditures at the time the obligations are made.	Within 24 hours, including weekends and holidays, of making the expenditure, incurring the obligation, or placing the order.

HOW TO FILE REPORTS

Using the Commission's Website. Candidates who receive or expect to receive at least $1,500 for their campaigns must file reports electronically on the Commission's website. Candidates or treasurers must enter the required information and click "File Report" by 11:59 p.m. on the filing deadline. Candidates who lack access to the technology or the technological ability to file reports on the internet may request a waiver by April 15, 2014. The Commission will grant all reasonable requests.

Using Paper Forms. For candidates who are not required to file electronically, each original campaign finance report signed by the candidate and treasurer must be properly filed with the Commission by the filing deadline, except in two circumstances. A properly signed report may be faxed to the Commission office at (207) 287-6775 by 11:59 p.m. on the deadline, provided that the Commission receives the original report within five calendar days. A report mailed to the Commission by certified or registered mail and postmarked at least 2 days before the filing deadline will not be considered late, even if it is received after the deadline.

Commission staff will be available until 5:00 p.m. on filing deadlines to offer assistance to candidates and campaign staff.

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2014 ELECTRONIC FILING WAIVER

All candidates who receive or expect to receive $1,500 for their campaigns are required to file their campaign finance reports electronically on the Commission's website. Filing electronically has many advantages, such as:

NO MATH – You do not need to enter any totals or fill out any summary pages. Just enter the individual receipts and expenditures, and the e-filing system will take care of the rest.

CONVENIENCE – All you need is internet access in order to file your reports. There is no need to come to the Commission's office on the filing deadline or worry about mailing the report by the filing deadline.

You may request a waiver of the electronic filing requirement if you lack access to the technology or the technological ability to file reports electronically. If you wish to request a waiver, sign the bottom of this page and submit it to the Ethics Commission. You must do this no later than April 15, 2014. The Commission will grant all reasonable requests for exceptions.

I REQUEST A WAIVER OF THE ELECTRONIC FILING REQUIREMENT BECAUSE I LACK ACCESS TO THE NECESSARY TECHNOLOGY OR THE TECHNOLOGICAL ABILITY TO FILE REPORTS ELECTRONICALLY.

Date	Candidate's Signature
	Print Name

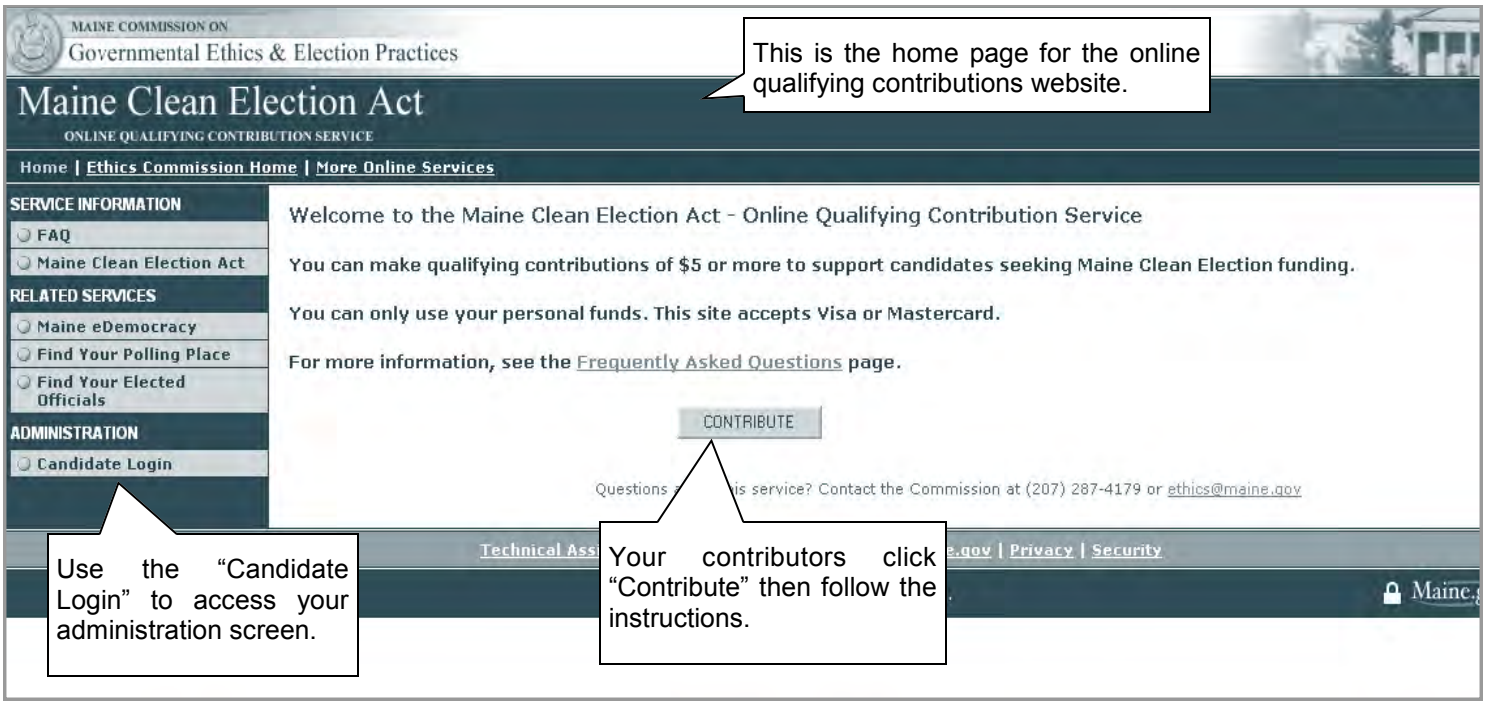
Commission on Governmental Ethics and Election Practices
135 State House Station, Augusta, ME 04333
207-287-4179

August 25, 2013

Maine Clean Election Act Candidates Online Qualifying Contributions Service

Online Qualifying Contributions Website:

http://www.maine.gov/cleanelections



The online qualifying contribution service is quick and convenient for contributors and candidates. Contributors use a secure website to make qualifying contributions with a VISA or MasterCard. Contributors who give their qualifying contribution online do not need to sign a paper form because they sign electronically when they make their contribution.

The system is convenient for candidates because it automatically verifies the voter registration of the contributor. If the system is not able to verify the voter registration, the contributor is still able to make a qualifying contribution online but the campaign must get the contributor's voter registration verified by the town clerk. Candidates download and print the online receipt and acknowledgement forms with the *unverified* contributors. These forms are brought to the town clerks for verification.

The online system uses data from the Secretary of State's Central Voter Registry (CVR) for voters' names and addresses. If the system does not recognize a contributor's street name, the system will give the contributor a list of similar street names to choose from. If the system does not recognize an address because it is not in the CVR, e.g., an address in a new development, the contributor will get instructions on how to make a contribution using a paper form.

Qualifying Contributions Online Website: Candidate Access

To access the administrative section of the online qualifying contribution system, candidates use their electronic-filing system user name and password which was assigned to them when they registered as a candidate. When logged into the administrative section, a candidate can review the status of their online qualifying contributions, including the verification of contributors' voter registration. Candidates can also search for contributions by contributor name or town or date range, download receipt and acknowledgement forms, and view the total contributions made online.

To log on to the site:

1. Go to www.maine.gov/ethics.
2. Look for "ONLINE SERVICES" in the list of links on the left hand side of the screen, and select "Qualifying Contributions."
3. On this screen, look for "Candidate Login" under "Administration" on the left hand side of the screen.
4. Enter your user name and password that you use for e-filing your campaign finance reports. We sent that to you when you registered. Call us if you don't have it.
5. Once on your administration screen, select the tab for the service or report you want.

Information for Your Supporters

Direct your supporters to go to www.maine.gov/cleanelections. Tell them to click the "Contribute" - yellow button.

They will need to:

- enter their name and the street address where they are registered to vote;
- select the candidates they wish to make a qualifying contribution to;
- enter payment information using a credit card or bank debit card (MasterCard and VISA only); and
- sign the affirmation statement electronically (no hand-written signature required).

The online system will automatically list all gubernatorial candidates and the legislative candidates who are running in the contributor's district.

You can put a link to the online qualifying contribution service on your campaign website or send the link in an e-mail to your supporters and include instructions like the sample below.

Please note that this online service is for qualifying contributions and not seed money contributions.

Sample instructions for your supporters:

1. Go to www.maine.gov/cleanelections.
2. Click "Contribute" - yellow button.
3. Follow the instructions to make a contribution to support my candidacy and to help me qualify for public funding for my campaign.
4. Make sure you enter the address where you are registered to vote. If the website cannot verify you as a registered voter, please contribute. I will be able to get your name verified by the town clerk and your contribution will count.

Thank you

MAINE CLEAN ELECTION ACT

QUALIFYING CONTRIBUTIONS - RECEIPT AND ACKNOWLEDGEMENT

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES
135 STATE HOUSE STATION, AUGUSTA, ME 04333
207-287-4179
WWW.MAINE.GOV/ETHICS

CANDIDATE'S NAME: _____ OFFICE: ☐ HOUSE ☐ SENATE DISTRICT #_____
(Please check box above)

ALL CONTRIBUTORS MUST BE FROM THE TOWN OR CITY OF: _____

IMPORTANT NOTICE TO CONTRIBUTORS:

- **Your signature and qualifying contribution of $5 or more will help the candidate named above to be eligible for public funding from the State to pay for the candidate's campaign.**
- **By signing below, you affirm that you have used your personal funds to make this contribution and that you have received nothing of value in exchange for your signature and contribution.**

	Date	Check/M.O.#	Contributor's Name (Please Print)	Residential Address (No PO Box)	Contributor's Signature
1					
2					
3					
4					
5					
6					
7					
8					

Falsifying any information on this form is punishable by law.
Please make checks and money orders payable to Maine Clean Election Fund. Money orders must be signed by the contributors.

Municipal Registrars: Please circle the number of each contributor who is registered to vote in the district of the candidate. Please complete the statement below by inserting the total number of contributors on this page who are registered in the district. Please also cross out any blank lines or contributors who are not registered in the candidate's district.

I have verified that _____ contributors circled above are registered to vote in the electoral division of the candidate.

Date: _____

Signature of Registrar: _____

Circulators: Anyone circulating this form must complete and sign the statement below for the contributions collected on this form to be accepted by the Commission.

I, (print name) _____, affirm that: (1) I collected the qualifying contributions, (2) to the best of my knowledge and belief, the signature is the signature of the person whose name it purports to be, (3) the contribution came from the personal funds of the contributor, and (4) I did not give anything of value to the contributor in exchange for their contribution and signature.

Signature of Circulator: _____ Date: _____

Residential Address: _____

City/Town/State/Zip: _____ Phone: _____

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

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

INSTRUCTIONS FOR COLLECTING $5 QUALIFYING CONTRIBUTIONS

Using Receipt and Acknowledgement Forms

1. Qualifying contributions are checks or money orders from registered Maine voters in the amount of $5 or more made payable to the "Maine Clean Election Fund." For legislative candidates, the contributors must be registered to vote in the candidate's district.

2. Money orders must be signed by the contributor.

3. The $5 (or more) qualifying contribution must come from the personal funds of the contributor.

4. Every person making a qualifying contribution of $5 (or more) by check or money order must sign a Receipt and Acknowledgment Form. Spouses, domestic partners, family members, and friends cannot sign for each other. The campaign may make photocopies of the form if additional sheets are needed.

5. All contributors listed on a single page of the Receipt and Acknowledgment Form should be from the same town or city.

6. Members of a family who are registered to vote in the same household may combine contributions in one check or money order, provided that each contributor gives the qualifying contribution from their personal funds and signs the Receipt and Acknowledgment Form. *(Note: If a money order is used, all contributors must sign the money order.)*

7. Checks drawn from a checking account with a business name are acceptable if the contributor's name is also imprinted on the check (not hand printed) or the contributor submits a note or makes a notation on the check (e.g., memo line) that the contributor uses the business account for personal expenses.

8. Candidates and campaign staff must clearly explain to the contributor that the purpose of collecting qualifying contributions and signatures is to qualify for Maine Clean Election Act funding for their campaign. It is a violation of the Act to misrepresent the purpose of collecting the contribution or contributor's signature.

9. Anyone who circulates the Receipt and Acknowledgment Form and collects the qualifying contributions must read and complete the circulator's section at the bottom of the form, date and sign in the space provided.

Additional Instructions from Candidate:

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2014 REQUEST FOR CERTIFICATION

As a Maine Clean Election Act Candidate for the Legislature

2014 CERTIFICATION DEADLINE FOR LEGISLATIVE CANDIDATES:
Tuesday, April 22, 2014 by 5:00 p.m.

CANDIDATE'S NAME: _____

OFFICE SOUGHT: _____ DISTRICT #_____ PARTY: _____

I hereby request to be certified as a Maine Clean Election Act candidate. I agree to comply with all requirements of the Act and the Commission's rules. I have:

- signed and filed a Declaration of Intent to participate in the Maine Clean Election Act;
- qualified as a candidate by petition or other means (confirmed by Secretary of State's Office);
- complied with seed money restrictions and otherwise met the requirements for participation in the Maine Clean Election Act;
- read the Commission's guidelines on permissible campaign-related expenditures;
- established a separate campaign account in a financial institution; and
- if applicable, any person who circulated my Receipt and Acknowledgement forms and collected qualifying contributions did so with my knowledge and consent.

With this Request for Certification, I have submitted (please check the appropriate boxes):

☐ at least the minimum number of qualifying contributions. I have submitted ___ qualifying contributions, which is the total collected on Receipt and Acknowledgement forms and on the Commission's website.

☐ for contributions made by check and money order, the original Receipt and Acknowledgement forms verified by the municipal clerks with the checks or money orders attached to the appropriate forms, in the order that the contributions are listed on the forms.

☐ for contributions made by credit or debit card on the Commission's website that were not verified by the online system, the printed Receipt and Acknowledgement forms verified by the municipal clerks.

☐ an alphabetical list of all qualifying contributors, which includes their towns and cities.

☐ a seed money campaign finance report filed electronically. (If no seed money was raised or spent, a "no activity report" must be filed. If you requested an electronic filing waiver, submit the completed paper report signed by your treasurer.)

Request for Extension. A candidate may request an extension of time to file the seed money report and the alphabetical list. The deadline for submitting the qualifying contributions and receipt and acknowledgement forms cannot be extended. I request an extension of time to file the following:

☐ Seed Money Report ☐ List of Contributors

_____ _____

Candidate's Signature Date

2014 Travel Log for MCEA Candidates and their Campaign Staff

A travel log is required if MCEA funds are used for travel reimbursements. Logs must be maintained until Dec. 2017.

Candidate's Name

Name:
(Person requesting reimbursement)

Address:

Date of Travel (Required)	Odometer Reading at Start (Recommended)	Odometer Reading at End (Recommended)	Number of Miles Traveled (Required)	Specific Purpose and Destination of Travel (Required)

HOW TO USE THIS FORM

- **Logs must be completed contemporaneously—at the time of travel.**
- **Start and end odometer readings are highly recommended.**
- **The purpose of the travel must be specified in detail: "door to door," "attended meet and greet" and "candidates' forum" - are acceptable descriptions. "Campaigning" or "candidate activities" are not acceptable because they do not describe the purpose in enough detail.**

	Number of miles this page
	Number of miles from attached pages
	Total miles traveled
$	Multiply total miles by $0.44 This is the maximum reimbursement amount based on mileage. The payments for fuel can not exceed this amount.

Affirmation. To be completed by the person requesting reimbursement from the campaign for that person's travel expenses.

I, _____, affirm that my travel reported in this log: (1) was campaign related; (2) occurred on the dates and to the destinations listed; (3) is, to the best of my knowledge, an accurate record of the number of miles traveled; and (4) that the entries in this log were made on the day the travel occurred.

Signature of person requesting reimbursement

Date

(For use by campaign)
Date of Reimbursement:

$_____ Actual Amount of Reimbursement

2014 Travel Log for MCEA Candidates and their Campaign Staff

A travel log is required if MCEA funds are used for travel reimbursements. Logs must be maintained until Dec. 2017.

Page ___

Date of Travel (Required)	Odometer Reading at Start (Recommended)	Odometer Reading at End (Recommended)	Number of Miles Traveled (Required)	Specific Purpose and Destination of Travel (Required)
Total miles traveled this page				

2014 Election Year

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Fax: 207-287-6775

2014 SEED MONEY REPORT

FOR MAINE CLEAN ELECTION ACT CANDIDATES

Please complete ALL entries.

NAME OF CANDIDATE			☐ CHECK IF CHANGED FROM PREVIOUS REPORT
STREET			
CITY AND ZIP CODE		TELEPHONE NUMBER	
E-MAIL			
OFFICE SOUGHT		DISTRICT NUMBER	

NAME OF TREASURER			☐ CHECK IF CHANGED FROM PREVIOUS REPORT
MAILING ADDRESS STREET			
CITY AND ZIP CODE		TELEPHONE NUMBER	
E-MAIL			

Check appropriate box below	DUE DATE	DATES OF REPORT PERIOD
☐ **Seed Money Report** *(first report filed)*	**April 22, 2014**	**Beginning of campaign – April 22, 2014**
☐ **Seed Money Report** *(for senate candidates who filed a 2014 January Semiannual Report)*	**April 22, 2014**	**January 1, 2014 – April 22, 2014**

This report is:

☐ **Amendment to:** _____

☐ **Other (specify):** _____

☐ **Check if campaign had no activity for the report period (no other pages are required).**

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

_____ _____

Treasurer's Signature **Date**

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S.A. § 453).

CANDIDATE'S NAME

SCHEDULE A
CASH SEED MONEY CONTRIBUTIONS

- **Only individuals may make seed money contributions. Contributions must be from their personal funds and not from other sources. Each contributor may give up to $100 in seed money. Lobbyists, lobbyist associates, and their employers may not make seed money contributions during the legislative session. Members of the candidate's family may each give up to $100 in seed money, provided the contributions are from their personal funds.**
- **Total seed money contributions may not exceed $1,500 for Senate candidates and $500 for House candidates.**
- **Itemize all cash contributions from contributors who have given you more than $50 in seed money contributions.**
- **Both cash and in-kind contributions count toward the $50 threshold.**
- **Report the occupation and employer for every individual who contributed more than $50 in this report period.**
- **If you have requested employment information 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 "total of contributions $50 or less" and the total amount on a line on this page. Once a contributor has given you more than $50 in a report period, you must list that contributor separately.**
- **On the first report of the election cycle only, include the total of any surplus campaign funds, if any, from a previous election cycle that you are transferring to your 2014 campaign. Please contact the Commission staff for more information about complying with seed money restrictions when transferring surplus funds from a previous campaign.**

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
			Total cash seed money contributions (this page only) ⇒ (*combined totals from all Schedule A pages must be listed on Schedule F, line 1*)	

Key Codes:
1 = Candidate and Candidate's Spouse/Domestic Partner
2 = Other Individuals
8 = Contributors Giving $50 or Less
9 = Transfer from Previous Campaign

CANDIDATE'S NAME

SCHEDULE A
CASH SEED MONEY CONTRIBUTIONS (continued)

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT

CANDIDATE'S NAME

SCHEDULE A-1
IN-KIND CONTRIBUTIONS

In-kind contributions are goods and services (including facilities) that you received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the campaign by the candidate or supporters if the campaign does not expect to reimburse the candidate or supporter. These contributions may come from the candidate, candidate's family, and supporters.

- **In-kind contributions are subject to the seed money restrictions described on Schedule A.**
- **Itemize all in-kind contributions from contributors who have given you contributions totaling more than $50 in this report period.**
- **Both cash and in-kind contributions count toward the $50 threshold.**
- **Report the occupation and employer for every individual who contributed more than $50 in this report period.**
- **If you have requested employment information from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.**
- **For in-kind contributions of $50 or less, enter "total of contributions $50 or less" and the total amount on a line on this page. Once a contributor has given you more than $50 in a report period, you must list that contributor separately.**
- **Goods that you have retained from an earlier election such as signs are not in-kind contributions to your current campaign.**
- **If you received goods and services at a discount, report the amount of the difference between the fair market value and the cost you paid.**

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)
			Total in-kind contributions (this page only) ⇒ *(combined totals from all Schedule A-1 pages must be listed on Schedule F, line 5)*		

Key Codes:
1 = Candidate and Candidate's Spouse/Domestic Partner
2 = Other Individuals
8 = Contributors Giving $50 or Less

CANDIDATE'S NAME

SCHEDULE B
EXPENDITURES

- **Enter the date, payee, expenditure type, and amount for each expenditure made during the report period.**
- **Enter a description or purpose of the goods and services purchased in the "Remark" section.**
- **Expenditures made with a candidate's or an authorized individual's personal funds must be reimbursed within the same report period as the expenditure. Enter the vendor as the payee and the purchase date. Report the name of the individual who made the payment in the remarks section. Report goods and services purchased by others for which no reimbursement will be made as an in-kind contribution on Schedule A-1.**
- **Only enter expenditures that have actually been paid. Enter unpaid debts and obligations on Schedule D.**

Expenditure Types		Expenditure Types	
CNS	Campaign consultants	POS	Postage for U.S. Mail and mail box fees
CON	Contribution to other candidate, party, committee	PRO	Other professional services
EQP	Equipment (office machines, furniture, cell phones, etc.)	PRT	Print media ads only (newspapers, magazines, etc.)
FND	Fundraising events	RAD	Radio ads, production costs
FOD	Food for campaign events, volunteers	SAL	Campaign workers' salaries and personnel costs
LIT	Printing and graphics (flyers, signs, palmcards, t-shirts, etc.)	TRV	Travel (fuel, mileage, lodging, etc.)
MHS	Mail house (all services purchased)	TVN	TV or cable ads, production costs
OFF	Office supplies, utilities, phone/internet services, rent, etc.	WEB	Web advertising
OTH	Other (bank fees, entrance fees, small tools, wood, etc.)	NEW - For payments and reimbursements made to the candidate's family and household members, the relationship to the candidate must be reported in the Remark section (e.g., spouse, brother, roommate, etc.).	
PHO	Phone banks, automated telephone calls		
POL	Polling and survey research		

DATE EXPENDITURE MADE	NAME OF EACH PAYEE	EXPENDITURE TYPE (use code from above)	REMARK (describe all goods and services purchased)	AMOUNT
			Total expenditures (this page only) ⇒ (***combined totals from all Schedule B pages must be listed on Schedule F, line 4***)	

CANDIDATE'S NAME

SCHEDULE B
EXPENDITURES (continued)

Expenditure Types		Expenditure Types	
CNS	Campaign consultants	POS	Postage for U.S. Mail and mail box fees
CON	Contribution to other candidate, party, committee	PRO	Other professional services
EQP	Equipment (office machines, furniture, cell phones, etc.)	PRT	Print media ads only (newspapers, magazines, etc.)
FND	Fundraising events	RAD	Radio ads, production costs
FOD	Food for campaign events, volunteers	SAL	Campaign workers' salaries and personnel costs
LIT	Printing and graphics (flyers, signs, palmcards, t-shirts, etc.)	TRV	Travel (fuel, mileage, lodging, etc.)
MHS	Mail house (all services purchased)	TVN	TV or cable ads, production costs
OFF	Office supplies, utilities, phone/internet services, rent, etc.	WEB	Web advertising
OTH	Other (bank fees, entrance fees, small tools, wood, etc.)	NEW - For payments and reimbursements made to the candidate's family and household members, the relationship to the candidate must be reported in the Remark section (e.g., spouse, brother, roommate, etc.).	
PHO	Phone banks, automated telephone calls		
POL	Polling and survey research		

DATE EXPENDITURE MADE	NAME OF EACH PAYEE	EXPENDITURE TYPE (use code from above)	REMARK (describe all goods and services purchased)	AMOUNT

Total expenditures (this page only) ⇒
(*combined totals from all Schedule B pages must be listed on Schedule F, line 4*)

CANDIDATE'S NAME

SCHEDULE D
UNPAID DEBTS AND OBLIGATIONS

- **List any debts or obligations that are unpaid at the close of this period (even if included in earlier reports).**
- **You have incurred a debt or obligation if you have placed an order for a good or service without making a payment; made a promise or agreement to pay for a good or service; signed a contract for a good or service; or received delivery of a good or service for which you have not paid.**
- **If the campaign 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.**
- **Report actual payments to vendors on Schedule B.**

DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT
		Total unpaid debts and obligations (this page only) ⇒ ***(combined totals from all Schedule D pages must be listed on Schedule F, line 6)***	

CANDIDATE'S NAME

DATE SUBMITTED:_____

SCHEDULE F
SUMMARY SCHEDULE
(MCEA CANDIDATES)

This page is required for all candidates except those checking the no activity box on the cover page of the report.

The cash balance on line 14 must match the campaign's reconciled bank account balance as of the last day of the report period.

CASH ACTIVITY FOR THIS PERIOD	
RECEIPTS	
1. CASH SEED MONEY CONTRIBUTIONS (Schedule A)	
2. OTHER CASH RECEIPTS (interest, etc.)	
3. TOTAL RECEIPTS (lines 1 + 2)	
EXPENDITURES	
4. EXPENDITURES (total of all Schedule B pages)	

OTHER ACTIVITY FOR THIS PERIOD	
5. IN-KIND CONTRIBUTIONS (total of all Schedule A-1 pages)	
6. TOTAL UNPAID DEBTS AT CLOSE OF PERIOD (total all Schedule D pages)	

CASH SUMMARY	
7. CASH BALANCE AT BEGINNING OF PERIOD (Schedule F, from last report)	
8. *PLUS* TOTAL RECEIPTS THIS PERIOD (line 3 above)	+
9. *MINUS* TOTAL PAYMENTS THIS PERIOD (line 4 above)	−
10. CASH BALANCE AT CLOSE OF PERIOD (lines 7 + 8 - 9) (must match reconciled bank account balance)	=