

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Maine Republican Party

ADDRESS (number and street) 9 higgins st  
 Check if different than previously reported. (ACC)  
Augusta ME 04330

2. **FEC IDENTIFICATION NUMBER** C00003111  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 25 2008 through 12 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Philip Roy, Jr.

Signature of Treasurer Electronically Filed by Philip Roy, Jr. Date 01 31 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Maine Republican Party

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		42037.49
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	182817.64									
(c) Total Receipts (from Line 19) .....	50.00	294823.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	182867.64	336861.18								
7. Total Disbursements (from Line 31) .....	16339.89	80803.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	166527.75	256057.90								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	12014.30									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Maine Republican Party

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	155112.62
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	50.00	137711.07
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	50.00	292823.69
(b) Political Party Committees .....	0.00	1000.00
(c) Other Political Committees (such as PACs) .....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ▶	50.00	294823.69
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	50.00	294823.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	50.00	294823.69

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	3902.90
(ii) Non-Federal Share.....	0.00	6938.50
(b) Other Federal Operating Expenditures.....	16339.89	69961.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16339.89	80803.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16339.89	80803.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16339.89	73864.78

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	50.00	294823.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	50.00	294823.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16339.89	73864.78
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16339.89	73864.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Bangor Letter Shop, Inc.	Transaction ID: 011420090E6921 Date of Disbursement 12 / 17 / 2008
	Mailing Address 99 Washington Street	Amount of Each Disbursement this Period 6311.40
	City Bangor State ME Zip Code 04401-6518	
	Purpose of Disbursement 4056 direct mail expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		4056 DIRECT MAIL EXPENSE

B.	Full Name (Last, First, Middle Initial) Bangor Letter Shop, Inc.	Transaction ID: 011420090E6922 Date of Disbursement 12 / 17 / 2008
	Mailing Address 99 Washington Street	Amount of Each Disbursement this Period 3001.65
	City Bangor State ME Zip Code 04401-6518	
	Purpose of Disbursement 4056 driect mailing expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		4056 DRIECT MAILING EXPENSE

C.	Full Name (Last, First, Middle Initial) Central Maine Power	Transaction ID: 011420090E6923 Date of Disbursement 12 / 10 / 2008
	Mailing Address 83 Edison Drive	Amount of Each Disbursement this Period 69.40
	City Augusta State ME Zip Code 04332-1084	
	Purpose of Disbursement utilities - electricy	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		UTILITIES - ELECTRICY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9382.45</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) City of Augusta	Transaction ID: 011420090E6924 Date of Disbursement
	Mailing Address 16 Cony St.	<input type="text" value="12"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Augusta State ME Zip Code 04330-	Amount of Each Disbursement this Period
	Purpose of Disbursement state committee meeting expense	<input type="text" value="156.38"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		STATE COMMITTEE MEETING EXPENSE

B.	Full Name (Last, First, Middle Initial) Country Curtains	Transaction ID: 011420090E6925 Date of Disbursement
	Mailing Address 2299 Woodbury Ave.	<input type="text" value="12"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Portsmouth State NH Zip Code 03801-	Amount of Each Disbursement this Period
	Purpose of Disbursement building maintenance	<input type="text" value="256.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BUILDING MAINTENANCE

C.	Full Name (Last, First, Middle Initial) Country Curtains	Transaction ID: 011420090E6927 Date of Disbursement
	Mailing Address 2299 Woodbury Ave.	<input type="text" value="12"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Portsmouth State NH Zip Code 03801-	Amount of Each Disbursement this Period
	Purpose of Disbursement building maintenance	<input type="text" value="159.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BUILDING MAINTENANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Country Curtains	Transaction ID: 011420090E6926 Date of Disbursement 12 / 17 / 2008
	Mailing Address 2299 Woodbury Ave.	Amount of Each Disbursement this Period 119.96
	City Portsmouth State NH Zip Code 03801-	
	Purpose of Disbursement building maintenance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BUILDING MAINTENANCE

B.	Full Name (Last, First, Middle Initial) Michelle Dale	Transaction ID: 81202.E6671 Date of Disbursement 12 / 12 / 2008
	Mailing Address 409 Churchill Road	Amount of Each Disbursement this Period 666.72
	City Augusta State ME Zip Code 04330-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Fairpoint Communications	Transaction ID: 011420090E6928 Date of Disbursement 12 / 11 / 2008
	Mailing Address P. O. Box 1939	Amount of Each Disbursement this Period 222.36
	City Portland State ME Zip Code 04104-	
	Purpose of Disbursement utilities-telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		UTILITIES-TELEPHONE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1009.04
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Forbes Glideon Mailing Address City State Zip Code Purpose of Disbursement building maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 011420090E6929 Date of Disbursement 12 / 10 / 2008
	Amount of Each Disbursement this Period 375.00
	BUILDING MAINTENANCE
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Intuit Mailing Address City State Zip Code Purpose of Disbursement software support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 011420090E6930 Date of Disbursement 12 / 17 / 2008
	Amount of Each Disbursement this Period 209.95
	SOFTWARE SUPPORT
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Mattsons Home Decor Mailing Address 243 Western Ave City State Zip Code Augusta ME 04330- Purpose of Disbursement building maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 011420090E6936 Date of Disbursement 12 / 10 / 2008
	Amount of Each Disbursement this Period 2355.00
	BUILDING MAINTENANCE
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2939.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.

Full Name (Last, First, Middle Initial)  
Pine Tree Waste, Inc.

Mailing Address 31 Freedom Parkway

City State Zip Code  
Bangor ME 04401-

Purpose of Disbursement  
building maintenance  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 011420090E6937  
Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

209.90

BUILDING MAINTENANCE

B.

Full Name (Last, First, Middle Initial)  
Pizza Connection

Mailing Address 46 Bangor Street

City State Zip Code  
Augusta ME 04330-

Purpose of Disbursement  
meeting expense - state committee  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 011420090E6938  
Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

265.58

MEETING EXPENSE - STATE COMMITTEE

C.

Full Name (Last, First, Middle Initial)  
Savings Bank of Maine

Mailing Address P. O. Box 190

City State Zip Code  
Gardiner ME 04345-

Purpose of Disbursement  
Social Security  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 011420090E6946  
Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

426.35

SOCIAL SECURITY

SUBTOTAL of Disbursements This Page (optional) .....

901.83

TOTAL This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.

Full Name (Last, First, Middle Initial)  
Savings Bank of Maine

Transaction ID: 011420090E6944  
Date of Disbursement

Mailing Address P. O. Box 190

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

City State Zip Code  
Gardiner ME 04345-

Amount of Each Disbursement this Period

733.00
--------

Purpose of Disbursement  
Federal Withholding

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

FEDERAL WITHHOLDING

State: District:

B.

Full Name (Last, First, Middle Initial)  
Savings Bank of Maine

Transaction ID: 011420090E6945  
Date of Disbursement

Mailing Address P. O. Box 190

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

City State Zip Code  
Gardiner ME 04345-

Amount of Each Disbursement this Period

99.71
-------

Purpose of Disbursement  
Medicare payment

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

MEDICARE PAYMENT

State: District:

C.

Full Name (Last, First, Middle Initial)  
Savings Bank of Maine

Transaction ID: 011420090E6939  
Date of Disbursement

Mailing Address P. O. Box 190

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	8

City State Zip Code  
Gardiner ME 04345-

Amount of Each Disbursement this Period

7.50
------

Purpose of Disbursement  
wire transfer fee

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

WIRE TRANSFER FEE

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

840.21
--------

**TOTAL** This Period (last page this line number only) .....

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 12 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 011420090E6940
	Mailing Address 32 College Ave. #302	Date of Disbursement 12 / 17 / 2008
	City Waterville State ME Zip Code 04901-	Amount of Each Disbursement this Period 109.19
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 011420090E6941
	Mailing Address 32 College Ave. #302	Date of Disbursement 12 / 29 / 2008
	City Waterville State ME Zip Code 04901-	Amount of Each Disbursement this Period 131.69
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	240.88
<b>TOTAL</b> This Period (last page this line number only) .....	15886.24

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Staples			Nature of Debt (Purpose): Office Supplies
Mailing Address I-95 & Civic Center Blvd.			
City Augusta	State ME	ZIP Code 04330-	

Outstanding Balance Beginning This Period		Transaction ID: LS70127.E5098	
146.49			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	146.49	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> CTI Communication			Nature of Debt (Purpose): Phone Equipment
Mailing Address 202 Warren Ave Suite 300/400			
City Portland	State ME	ZIP Code 04103-	

Outstanding Balance Beginning This Period		Transaction ID: LS70127.E5086	
1427.39			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1427.39	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> City of Augusta			Nature of Debt (Purpose): Adjustment to bill
Mailing Address 16 Cony St			
City Augusta	State ME	ZIP Code 04330-5200	

Outstanding Balance Beginning This Period		Transaction ID: LS70127.E5085	
2905.54			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2905.54	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	4479.42
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 / 16
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Albisons Printing	Nature of Debt (Purpose): Printing for Chairmans Reception
Mailing Address 124 Riverside Dr	
City State ZIP Code Augusta ME 04330-4384	

Outstanding Balance Beginning This Period 103.75	<b>Transaction ID:</b> LS70428.E5222	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 103.75

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Telemarketing Expense
Mailing Address 2401 W Behrend Dr Ste 7 Suite 7	
City State ZIP Code Phoenix AZ 85027-4143	

Outstanding Balance Beginning This Period 3057.10	<b>Transaction ID:</b> LS70127.E5105	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3057.10

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Telemarketing
Mailing Address 2401 W Behrend Dr Ste 7 Suite 7	
City State ZIP Code Phoenix AZ 85027-4143	

Outstanding Balance Beginning This Period 4314.60	<b>Transaction ID:</b> LS80129.E5665	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4314.60

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	7475.45
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 / 16	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable			Nature of Debt (Purpose): Utilities - cable
Mailing Address PO Box 9148			
City Chelsea	State MA	ZIP Code 02150-9148	

Outstanding Balance Beginning This Period		<b>Transaction ID: LS70730.E5398</b>	
59.43			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	59.43	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	59.43
2) <b>TOTALS</b> This Period (last page this line number only).....	12014.30
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	12014.30

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
Maine Republican Party

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- X  Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only