



**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:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		52000.10
(b) Cash on Hand at Beginning of Reporting Period.....	36997.85	
(c) Total Receipts (from Line 19) .....	13567.00	108661.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	50564.85	160661.63
7. Total Disbursements (from Line 31).....	8764.56	118861.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	41800.29	41800.29
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) .....	42311.19	

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:  /  /  To:  /  /

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		
(i) Itemized (use Schedule A).....	2080.00	48055.00
(ii) Unitemized .....	3487.00	20243.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5567.00	68298.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5567.00	68298.00
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	163.40
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	0.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	8000.00	40200.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	8000.00	40200.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13567.00	108661.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5567.00	68461.53

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	1750.25	20458.19
(ii) Non-Federal Share.....	6584.31	76961.83
(b) Other Federal Operating Expenditures .....	95.00	12151.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8429.56	109571.05
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	335.00	335.00
(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)).....	335.00	335.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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	8955.29
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	8955.29
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8764.56	118861.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2180.25	41899.51

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5567.00	68298.00
34. Total Contribution Refunds (from Line 28(d)) .....	335.00	335.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5232.00	67963.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1845.25	32609.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	163.40
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1845.25	32445.82

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

All disbursements for payroll and employee benefits were for those spending less than 25% of their time on federal activities

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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. Gary Hammond**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 946 Pond Rd  
 City Sidney State ME Zip Code 04330-2130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hammond Tractor Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2013  
**Transaction ID : A55D361BDA48E40A0802**  
 Amount of Each Receipt this Period  
 250.00

**B. Dr. Karen Stram**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Oxbow Rd  
 City Dresden State ME Zip Code 04342-3412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2013  
**Transaction ID : ADFF48DED231E4218BA2**  
 Amount of Each Receipt this Period  
 250.00

**C. Lawrence E. Dwight**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 Parsons Beach Rd  
 City Kennebunk State ME Zip Code 04043-7433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dwight Investment Council Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2013  
**Transaction ID : AE0F88678E9A94AF2BAE**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Maine Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Howard Dana**

Mailing Address 41 Bowdoin St

City Portland State ME Zip Code 04102-3631

FEC ID number of contributing federal political committee. **C**

Name of Employer Verrill & Dana Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2013

**Transaction ID : AE1BAD270785416FB23**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Mrs. Catherine Goodwin**

Mailing Address 144 Cedar Rd

City Eliot State ME Zip Code 03903-1101

FEC ID number of contributing federal political committee. **C**

Name of Employer Senator Susan Collins Occupation office rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2013

**Transaction ID : AF8B92E46D77048F6A40**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. William Gardiner**

Mailing Address 66 Tidewater Ln

City Yarmouth State ME Zip Code 04096-5518

FEC ID number of contributing federal political committee. **C**

Name of Employer Maine Directions Inc Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2013

**Transaction ID : A1B8915BBB36E48EDA59**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Maine Republican Party**

**A. Peter A. Laverdiere**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4270 Black Island Rd  
 City Oxford State ME Zip Code 04270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation None  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt 07 / 29 / 2013  
**Transaction ID : AE4D4956DEF874C33AE3**  
 Amount of Each Receipt this Period 200.00

**B. Tom Shields**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 375 Maple Hill Rd  
 City Auburn State ME Zip Code 04210-8793  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2013  
**Transaction ID : A43DB3AD0143A4EB281B**  
 Amount of Each Receipt this Period 100.00

**C. Lawrence E. Dwight**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 Parsons Beach Rd  
 City Kennebunk State ME Zip Code 04043-7433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dwight Investment Council Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 31 / 2013  
**Transaction ID : A244A5FE44AB14D44986**  
 Amount of Each Receipt this Period 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Maine Republican Party**

**A. Heather Sirocki**  
Full Name (Last, First, Middle Initial)  
Mailing Address 32 Glendale Cir  
City Scarborough State ME Zip Code 04074-9170  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Of Maine Occupation Legislator  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2013  
**Transaction ID : A2EA1D076F8FC41B5BDB**  
Amount of Each Receipt this Period  
20.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2080.00

**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 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 checked="" 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**

Full Name (Last, First, Middle Initial)

**A. Gardiner Schneider**

Mailing Address PO Box 127

City Sedgwick State ME Zip Code 04676-0127

Purpose of Disbursement  
Refund of Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2013

Transaction ID : B9B801BF0E9F447768FD

Amount of Each Disbursement this Period

185.00

Full Name (Last, First, Middle Initial)

**B. Anthony Delcourt**

Mailing Address 57 Bradbury St

City Biddeford State ME Zip Code 04005-2323

Purpose of Disbursement  
Refund of Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2013

Transaction ID : B37401BD33E96448A980

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

335.00

335.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 39
	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 <b>Fair Point Communications</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address PO Box 1939	
City State Zip Code Portland ME 04104-5010	

Outstanding Balance Beginning This Period <input type="text" value="294.63"/>	<b>Transaction ID : D73F380BF9E3D4CB48F6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="294.63"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fair Point Communications</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address PO Box 1939	
City State Zip Code Portland ME 04104-5010	

Outstanding Balance Beginning This Period <input type="text" value="0.35"/>	<b>Transaction ID : DA4160958988B465D8E6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.35"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>. Transco</b>	Nature of Debt (Purpose): Office supplies
Mailing Address PO Box 268	
City State Zip Code Augusta ME 04332-0268	

Outstanding Balance Beginning This Period <input type="text" value="6052.30"/>	<b>Transaction ID : D4C7F26573D264DCBAF8</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6052.30"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="6347.28"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 39
	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 <b>Augusta Fuel Company</b>	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 2226	
City State Zip Code Augusta ME 04338-2226	

Outstanding Balance Beginning This Period <input type="text" value="540.34"/>	<b>Transaction ID : D1E0243F596524796B0C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="540.34"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): Software Support
Mailing Address 205 Pennsylvania Ave SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="2550.00"/>	<b>Transaction ID : D13A6C0C4E42140A4B17</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2550.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ILD Telecommunications, Inc.</b>	Nature of Debt (Purpose): Utilities
Mailing Address 5000 Sawgrass Village Cir Ste 30	
City State Zip Code Ponte Vedra Beach FL 32082-5042	

Outstanding Balance Beginning This Period <input type="text" value="29.05"/>	<b>Transaction ID : DA364AA41A4AD4DDDBF3</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29.05"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3119.39"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 39
	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 <b>Treasurer State Of Maine</b>	Nature of Debt (Purpose): Payroll taxes
Mailing Address State Offices	
City State Zip Code Augusta ME 04333-0001	

Outstanding Balance Beginning This Period <input type="text" value="738.00"/>	<b>Transaction ID : D3351D4E7C06F4F1AB63</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="738.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seacoast Security &amp; Tele.</b>	Nature of Debt (Purpose): Security Services
Mailing Address PO Box A	
City State Zip Code West Rockport ME 04865-0701	

Outstanding Balance Beginning This Period <input type="text" value="117.00"/>	<b>Transaction ID : DC1CECED9A4DD4BEBA9</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="117.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Treasurer State Of Maine</b>	Nature of Debt (Purpose): Payroll taxes - non FEA
Mailing Address State Offices	
City State Zip Code Augusta ME 04333-0001	

Outstanding Balance Beginning This Period <input type="text" value="168.00"/>	<b>Transaction ID : DAFB12686028F45FCB20</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="168.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1023.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 39
	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 <b>Verizon Wireless</b>	Nature of Debt (Purpose): Telephone services
Mailing Address 37 Xavier Loop	
City State Zip Code Augusta ME 04330-8084	

Outstanding Balance Beginning This Period <input type="text" value="209.87"/>	<b>Transaction ID : DE1F686C9531347E181F</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="209.87"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Staples Advantage</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 415256	
City State Zip Code Boston MA 02241-5256	

Outstanding Balance Beginning This Period <input type="text" value="65.22"/>	<b>Transaction ID : DBA640276496E41BD9E3</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="65.22"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>John Robinson</b>	Nature of Debt (Purpose): Management consulting
Mailing Address PO Box 855	
City State Zip Code Oxford ME 04270-0855	

Outstanding Balance Beginning This Period <input type="text" value="3400.00"/>	<b>Transaction ID : D82730DEC8300459FA66</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3400.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3675.09"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 39
	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 <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): Software Support
Mailing Address 205 Pennsylvania Ave SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="2550.00"/>	<b>Transaction ID : D9EE3E2F3AF39467B916</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2550.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kyes Insurance</b>	Nature of Debt (Purpose): Insurance
Mailing Address PO Box 311	
City State Zip Code Farmington ME 04938-0311	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D151B124CCCE942F0A43</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Riverside Disposal</b>	Nature of Debt (Purpose): Utilities
Mailing Address 700 River Rd	
City State Zip Code Chelsea ME 04330-1149	

Outstanding Balance Beginning This Period <input type="text" value="75.00"/>	<b>Transaction ID : DCFEA36B3524145B28FB</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="75.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3125.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 39
	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 <b>The Woodlands Club</b>	Nature of Debt (Purpose): Meeting Event Rental
Mailing Address 39 Woods Rd	
City State Zip Code Falmouth ME 04105-1153	

Outstanding Balance Beginning This Period <input type="text" value="1499.87"/>	<b>Transaction ID : D759D159D096B4E74BDE</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1499.87"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Augusta Post Office</b>	Nature of Debt (Purpose): Postage
Mailing Address 40 Western Ave	
City State Zip Code Augusta ME 04330-6325	

Outstanding Balance Beginning This Period <input type="text" value="256.00"/>	<b>Transaction ID : D86962AFEA39E4E938C6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="256.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fair Point Communications</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address PO Box 1939	
City State Zip Code Portland ME 04104-5010	

Outstanding Balance Beginning This Period <input type="text" value="295.30"/>	<b>Transaction ID : DEDD143C8B67749F1AFA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="295.30"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="2051.17"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 39
	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 <b>Verizon Wireless</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address PO Box 6050	
City State Zip Code Inglewood CA 90312-6050	

Outstanding Balance Beginning This Period <input type="text" value="163.63"/>	<b>Transaction ID : DA397F288122241289C7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="163.63"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Staples</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address 1131 Union St	
City State Zip Code Bangor ME 04401-3012	

Outstanding Balance Beginning This Period <input type="text" value="165.96"/>	<b>Transaction ID : D25CF341B39124B9B80B</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="165.96"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Riverside Disposal</b>	Nature of Debt (Purpose): Utilities
Mailing Address 700 River Rd	
City State Zip Code Chelsea ME 04330-1149	

Outstanding Balance Beginning This Period <input type="text" value="70.00"/>	<b>Transaction ID : D325E41D3E3454CFF9EB</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="70.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="399.59"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 39
	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 <b>ILD Telecommunications, Inc.</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address 5000 Sawgrass Village Cir Ste 30	
City State Zip Code Ponte Vedra Beach FL 32082-5042	

Outstanding Balance Beginning This Period <input type="text" value="29.05"/>	<b>Transaction ID : D1F9E17A6BBF542DE9FA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29.05"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Time Warner Cable</b>	Nature of Debt (Purpose): Utilities
Mailing Address 118 Johnson Rd	
City State Zip Code Portland ME 04102-1976	

Outstanding Balance Beginning This Period <input type="text" value="77.92"/>	<b>Transaction ID : D19EFB12895FB4CD8807</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="77.92"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>John Robinson</b>	Nature of Debt (Purpose): Mileage
Mailing Address PO Box 855	
City State Zip Code Oxford ME 04270-0855	

Outstanding Balance Beginning This Period <input type="text" value="298.10"/>	<b>Transaction ID : D98F56BA3B8004A6887B</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="298.10"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="405.07"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 39
	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 <b>Mr. Richard Cebra</b>	Nature of Debt (Purpose): Reimbursement
Mailing Address 15 Steamboat Landing Rd	
City State Zip Code Naples ME 04055-3716	

Outstanding Balance Beginning This Period 1333.65	Transaction ID : DB546783D43E84DFD93D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1333.65

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Albison's Printing</b>	Nature of Debt (Purpose): Printing Services
Mailing Address 124 Riverside Dr	
City State Zip Code Augusta ME 04330-4384	

Outstanding Balance Beginning This Period 196.88	Transaction ID : DE629ABFFDD2F4A24819	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 196.88

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hanover Insurance Co.</b>	Nature of Debt (Purpose): Insurance
Mailing Address PO Box 580045	
City State Zip Code Charlotte NC 28258-0045	

Outstanding Balance Beginning This Period 270.25	Transaction ID : D43F1D89B839940C4920	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 270.25

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1800.78
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 21 OF 39
	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 <b>City Of Augusta</b>	Nature of Debt (Purpose): Utilities
Mailing Address 16 Cony St	
City State Zip Code Augusta ME 04330-5200	

Outstanding Balance Beginning This Period <input type="text" value="202.50"/>	<b>Transaction ID : D9F1CA6FCFDA9423880D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="202.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Verizon Wireless</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address 37 Xavier Loop	
City State Zip Code Augusta ME 04330-8084	

Outstanding Balance Beginning This Period <input type="text" value="182.84"/>	<b>Transaction ID : D4F26B34A3BE84B038B3</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="182.84"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Central Maine Power</b>	Nature of Debt (Purpose): Utilities
Mailing Address 83 Edison Dr 4332	
City State Zip Code Augusta ME 04332-0000	

Outstanding Balance Beginning This Period <input type="text" value="68.26"/>	<b>Transaction ID : D1D74615E2EB5464FAAF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="68.26"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="453.60"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 39
	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 <b>Staples Advantage</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 415256	
City State Zip Code Boston MA 02241-5256	

Outstanding Balance Beginning This Period <input type="text" value="69.28"/>	<b>Transaction ID : D5D5CC59ED9B140DB8BA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="69.28"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Staples Advantage</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 415256	
City State Zip Code Boston MA 02241-5256	

Outstanding Balance Beginning This Period <input type="text" value="117.70"/>	<b>Transaction ID : DE917178E6AA14A9E8D0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="117.70"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Time Warner Cable</b>	Nature of Debt (Purpose): Utilities
Mailing Address 118 Johnson Rd	
City State Zip Code Portland ME 04102-1976	

Outstanding Balance Beginning This Period <input type="text" value="143.16"/>	<b>Transaction ID : D62938B270B994929B05</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="143.16"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="330.14"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 39
	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 <b>Augusta Fuel Company</b>	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 2226	
City State Zip Code Augusta ME 04338-2226	

Outstanding Balance Beginning This Period 462.17	Transaction ID : DFE1C9277357C4574862	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 462.17

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CIT Technology Fin Serv, Inc.</b>	Nature of Debt (Purpose): Office Equipment
Mailing Address PO Box 550599	
City State Zip Code Jacksonville FL 32255-0599	

Outstanding Balance Beginning This Period 530.81	Transaction ID : D355F120DA2D34A20BD8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 530.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hanover Insurance Co.</b>	Nature of Debt (Purpose): Commercial Insurance
Mailing Address PO Box 580045	
City State Zip Code Charlotte NC 28258-0045	

Outstanding Balance Beginning This Period 290.25	Transaction ID : D64C540A2E88047A1877	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 290.25

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1283.23
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 24 OF 39
	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 <b>Fair Point Communications</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address PO Box 1939	
City State Zip Code Portland ME 04104-5010	

Outstanding Balance Beginning This Period <input type="text" value="198.06"/>	<b>Transaction ID : D79DAE9D524624687B05</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="198.06"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Verizon Wireless</b>	Nature of Debt (Purpose): Telephone Services
Mailing Address PO Box 6050	
City State Zip Code Inglewood CA 90312-6050	

Outstanding Balance Beginning This Period <input type="text" value="577.08"/>	<b>Transaction ID : DFA0C0229CAFC425CA00</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="577.08"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>. Staples</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address 180 Bangor Mall Blvd	
City State Zip Code Bangor ME 04401-3632	

Outstanding Balance Beginning This Period <input type="text" value="382.55"/>	<b>Transaction ID : DAC7D1BA854894ABD861</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="382.55"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1157.69"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 39
	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 <b>Cardinals FEC Compliance Services, PLC</b>	Nature of Debt (Purpose): Accounting and Reporting
Mailing Address PO Box 6	
City State Zip Code Georgetown TX 78627-0006	

Outstanding Balance Beginning This Period <input type="text" value="860.00"/>	<b>Transaction ID : DD5CC46BC09F543D9909</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="860.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Patio Pub, Inc</b>	Nature of Debt (Purpose): Fundraising Event: Food and Beverage
Mailing Address PO Box 261	
City State Zip Code Old Orchard Beach ME 04064-0261	

Outstanding Balance Beginning This Period <input type="text" value="1979.50"/>	<b>Transaction ID : D76B8B34E8B844A3D9CD</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1979.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Richard Cebra</b>	Nature of Debt (Purpose): Reimbursement
Mailing Address 15 Steamboat Landing Rd	
City State Zip Code Naples ME 04055-3716	

Outstanding Balance Beginning This Period <input type="text" value="870.00"/>	<b>Transaction ID : DA098B5842EE24AEABF1</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="870.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3709.50"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 39
	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 <b>Mark Willis</b>	Nature of Debt (Purpose): Reimbursement
Mailing Address 109 Main St	
City State Zip Code Dennysville ME 04628-4304	

Outstanding Balance Beginning This Period 874.00	<b>Transaction ID : D8033E24AEC744190A84</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 874.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>John Robinson</b>	Nature of Debt (Purpose): Management Consulting
Mailing Address PO Box 855	
City State Zip Code Oxford ME 04270-0855	

Outstanding Balance Beginning This Period 850.00	<b>Transaction ID : DA22776FEB72F4CBDA1D</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 850.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Riverside Disposal</b>	Nature of Debt (Purpose): Utilities
Mailing Address 700 River Rd	
City State Zip Code Chelsea ME 04330-1149	

Outstanding Balance Beginning This Period 35.00	<b>Transaction ID : D05BFCE3DBCAE4719841</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 35.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1759.00
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 27 OF 39
	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 <b>Mr. Richard Cebra</b>	Nature of Debt (Purpose): Management Consulting
Mailing Address 15 Steamboat Landing Rd	
City State Zip Code Naples ME 04055-3716	

Outstanding Balance Beginning This Period 5160.00	<b>Transaction ID : D712B9D68531D42C1BE2</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5160.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Central Maine Power</b>	Nature of Debt (Purpose): Utilities
Mailing Address 83 Edison Dr 4332	
City State Zip Code Augusta ME 04332-0000	

Outstanding Balance Beginning This Period 60.70	<b>Transaction ID : DB6A3C2E96F17455EADB</b>	
Amount Incurred This Period 114.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 175.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Greater Augusta Utility</b>	Nature of Debt (Purpose): Utilities
Mailing Address 12 Williams St	
City State Zip Code Augusta ME 04330-5225	

Outstanding Balance Beginning This Period 88.16	<b>Transaction ID : DC88A022D5D2A4BF6B44</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 88.16

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5423.44
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 28 OF 39
	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 <b>Staples Advantage</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 415256	
City State Zip Code Boston MA 02241-5256	

Outstanding Balance Beginning This Period <input type="text" value="58.77"/>	<b>Transaction ID : D837044A09A8A4ACE9B5</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="58.77"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cardinals FEC Compliance Services, PLC</b>	Nature of Debt (Purpose): Accounting and Compliance
Mailing Address PO Box 6	
City State Zip Code Georgetown TX 78627-0006	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : D9920055667AB4E8D939</b>	
Amount Incurred This Period <input type="text" value="473.60"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="473.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Richard Cebra</b>	Nature of Debt (Purpose): Expense Reimbursement
Mailing Address 15 Steamboat Landing Rd	
City State Zip Code Naples ME 04055-3716	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : DE3C653B9317E4BF9A5D</b>	
Amount Incurred This Period <input type="text" value="516.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="516.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1048.37"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 29 OF 39
	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 <b>Cardinals FEC Compliance Services, PLC</b>	Nature of Debt (Purpose): Accounting and Compliance
Mailing Address PO Box 6	
City State Zip Code Georgetown TX 78627-0006	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DC23A8EB4226042A4849</b>	
Amount Incurred This Period 556.80	Payment This Period 0.00	Outstanding Balance at Close of This Period 556.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seacoast Security &amp; Tele.</b>	Nature of Debt (Purpose): Security Services
Mailing Address PO Box A	
City State Zip Code West Rockport ME 04865-0701	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D7E2B6F8FFFF640F1B7A</b>	
Amount Incurred This Period 118.76	Payment This Period 0.00	Outstanding Balance at Close of This Period 118.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seacoast Security &amp; Tele.</b>	Nature of Debt (Purpose): Security Services
Mailing Address PO Box A	
City State Zip Code West Rockport ME 04865-0701	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D7363E55A51344822935</b>	
Amount Incurred This Period 118.76	Payment This Period 0.00	Outstanding Balance at Close of This Period 118.76

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	794.32
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 30 OF 39
	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 <b>The Woodlands Club</b>	Nature of Debt (Purpose): Food and Beverage
Mailing Address 39 Woods Rd	
City State Zip Code Falmouth ME 04105-1153	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : D30B3962E4B2F4518B5A</b>	
Amount Incurred This Period <input type="text" value="22.84"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22.84"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Augusta Fuel Company</b>	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 2226	
City State Zip Code Augusta ME 04338-2226	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : D9FB0BCFBA08B4E15994</b>	
Amount Incurred This Period <input type="text" value="5.13"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5.13"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hanover Insurance Co.</b>	Nature of Debt (Purpose): Commercial Insurance
Mailing Address PO Box 580045	
City State Zip Code Charlotte NC 28258-0045	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : DBEC7C0B0FB3C4024B55</b>	
Amount Incurred This Period <input type="text" value="275.25"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.25"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="303.22"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 39
	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 <b>McLaughlin's on the Marina</b>	Nature of Debt (Purpose): Party Event: Food and Beverage
Mailing Address 108A Marina Road	
City State Zip Code Hampden ME 04444-1825	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D13ED60BFD1434DAFAD9</b>	
Amount Incurred This Period 1668.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1668.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CIT Technology Fin Serv, Inc.</b>	Nature of Debt (Purpose): Office Equipment Lease
Mailing Address PO Box 550599	
City State Zip Code Jacksonville FL 32255-0599	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D0C60F191AED64E489A3</b>	
Amount Incurred This Period 530.81	Payment This Period 0.00	Outstanding Balance at Close of This Period 530.81

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

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D8F1B8AD379AC4F4694B</b>	
Amount Incurred This Period 202.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 202.50

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2401.31
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 32 OF 39
	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 <b>Jason Savage</b>	Nature of Debt (Purpose): Expense Reimbursement
Mailing Address 77 Old County Rd S	
City State Zip Code West Enfield ME 04493-4519	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DFE89E89586B6480AAD4</b>	
Amount Incurred This Period 1611.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1611.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Riverside Disposal</b>	Nature of Debt (Purpose): Utilities
Mailing Address 700 River Rd	
City State Zip Code Chelsea ME 04330-1149	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D7D27ABBF3C4540C9BB2</b>	
Amount Incurred This Period 90.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1701.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	42311.19
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) ▶	42311.19

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED 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) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
Maine Republican Party

Transaction ID : H253a755cb8c744ee9f

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ 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

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Maine Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MAINE REPUBLICAN PARTY	MM / DD / YYYY 07 / 17 / 2013	4000.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	4000.00
<b>Transaction ID : H10C0A76927124EE5A7B</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Maine Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MAINE REPUBLICAN PARTY	MM / DD / YYYY 07 / 29 / 2013	4000.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	4000.00
<b>Transaction ID : HF69E95DAC5AD4111910</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	8000.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	8000.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Maine Republican Party

A. Full Name (Last, First, Middle Initial) <b>Michelle Dale</b>		Transaction ID : <b>H7307C08C70524C38874</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 409 Church Hill Rd				Allocated Activity or Event Year-To-Date 92890.77		
City Augusta	State ME	Zip Code 04330-8213		Date 07 / 05 / 2013		
Purpose of Disbursement: Payroll - Non-FEA		Category/ Type				
Activity or Event Identifier: Admin						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
192.96			725.89			918.85

B. Full Name (Last, First, Middle Initial) <b>Jason Savage</b>		Transaction ID : <b>HBA434C80447D414CA35</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 77 Old County Rd S				Allocated Activity or Event Year-To-Date 92890.77		
City West Enfield	State ME	Zip Code 04493-4519		Date 07 / 05 / 2013		
Purpose of Disbursement: Non-FEA Payroll		Category/ Type				
Activity or Event Identifier: Admin						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
442.20			1663.53			2105.73

C. Full Name (Last, First, Middle Initial) <b>US Treasury</b>		Transaction ID : <b>H5D5E9F2D9A4E4911B8E</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Pennsylvania Ave NW				Allocated Activity or Event Year-To-Date 92890.77		
City Washington	State DC	Zip Code 20229-0003		Date 07 / 05 / 2013		
Purpose of Disbursement: Payroll Taxes - Non FEA		Category/ Type				
Activity or Event Identifier: Admin						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
163.95			616.78			780.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
799.11		3006.20		3805.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Maine Republican Party

Form A: Jason Savage, Transaction ID: H78E1A60F2F2B491C8F3. Allocated Activity or Event: Administrative. Purpose of Disbursement: Non-FEA Payroll. Activity or Event Identifier: Admin. Date: 07/19/2013. Total Amount: 2105.73.

Form B: Michelle Dale, Transaction ID: HA677C2CDC5384DDA9B9. Allocated Activity or Event: Administrative. Purpose of Disbursement: Non-FEA Payroll. Activity or Event Identifier: Admin. Date: 07/19/2013. Total Amount: 918.86.

Form C: US Treasury, Transaction ID: H7C9039348E504C619C4. Allocated Activity or Event: Administrative. Purpose of Disbursement: Non-FEA Payroll Taxes. Activity or Event Identifier: Admin. Date: 07/19/2013. Total Amount: 780.71.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 799.11, 3006.19, 3805.30.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Maine Republican Party

Form A: Intuit Software, Transaction ID: HC9AA77E5A6C04BCBAC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Intuit Software, Transaction ID: H501E334CC8C44A5EB89. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Constant Contact, Transaction ID: H9C02FBC420E148938A1. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (52.60), NONFEDERAL SHARE (197.86), and TOTAL AMOUNT (250.46).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Maine Republican Party

Form A: Treasurer State Of Maine. Transaction ID: HCDCF3C5F190144BDA5D. Allocated Activity or Event: Administrative (checked). Date: 07/31/2013. Amounts: FEDERAL SHARE 99.43, NONFEDERAL SHARE 374.06, TOTAL AMOUNT 473.49.

Form B: Empty form for disbursement entry.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (99.43), NONFEDERAL SHARE (374.06), TOTAL AMOUNT (473.49).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE (1750.25), NONFEDERAL SHARE (6584.31), TOTAL AMOUNT (8334.56).