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Image# 14960652498

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	4	For A		ized Comr	nittee	<b>'</b>		Office	Use Only	
1. NAME OF COMMITTEE (in	full)	TYPE OR PI	RINT ▼		mple: If typin r the lines.	g, type	12FE4M	5		
ALDEN SMITH	FOR (	CONGRES	SS							1
ADDRESS (number ar	id atract)	499 BROA	DWAY SUIT	ΓΕ 303						
ADDNESS (Hulliber al	iu sireei)	1	1 1 1 1			1 1 1 1	1 1 1 1 1	1 1		, , I
Check if did than previous reported. (A	usly	BANGOR					ME	04401		
2. <b>FEC IDENTIFIC</b>	CATION N	IUMBER ▼		CITY		:	STATE A		ZIP CODE STATE ▼	DISTRICT
C C0054496	65			IS THIS REPORT	× NEW (N)	OR	AMENI (A)	DED	ME	02
4 TVDE OF DE	DODT (		1							
<ul><li>4. TYPE OF RE</li><li>(a) Quarterly R</li></ul>	•	hoose One)	(b) 1	2-Day PRE-	Election Repo	ort for the:				
					Primary (12P)		General (	12G)	Runc	off (12R)
× April 15	Quarterly	Report (Q1)		П	Convention (	12C)	Special (1	12S)		
July 15	Quarterly	Report (Q2)		_	`			,		
Octobe	r 15 Quart	erly Report (Q3	)	Election on	M = M /	D D /	Y " Y " Y " Y		in the State of	
January	31 Year-E	End Report (YE)	(c) 3	30-Day <b>POS</b> 1	-Election Rep	oort for the:				
					General (30G	)	Runoff (3	0R)	Spec	ial (30S)
Termina	ition Repor	t (TER)		Election on	M M /	D D /	Y " Y " Y " Y		in the State of	
5. Covering Period	М	01 / 01	/ Y Y 2	у у у 014	through	M M 03	31		2014	
certify that I have e	xamined t	this Report and	d to the be	est of my kno	owledge and I	belief it is tru	ue, correct an	d comp	olete.	
Type or Print Name	of Treasure	er Mr. Richa	rd Fournier							
Signature of Treasure	er <u>M</u> r	. Richard Fourni	er	ı	Electronically 1	Filed] D	ate 04	I / D		2014
NOTE: Submission of	false, erro	neous, or incor	nplete infor	mation may s	ubject the per	son signing t	his Report to t	the pena	alties of 2 U.S.	C. §437g.
Office Use Only									C FORM evised 02/2003	

#### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 24

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

#### ALDEN SMITH FOR CONGRESS

R	eport	Covering the Period: From:	01 / 01 / Y Y Y Y TO:	03 / 31 / 2014
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	1420.00	4521.00
	(b)	Total Contribution Refunds (from Line 20(d))	450.00	800.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	970.00	3721.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	15723.29	27956.88
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	15723.29	27956.88
8.		orting Period (from Line 27)	35974.04	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on ledule C and/or Schedule D)	60000.00	

#### 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

PAGE 3 / 24

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

#### ALDEN SMITH FOR CONGRESS

03 2014 01 01 2014 31 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 450.00 2700.00 (i) Itemized (use Schedule A)..... 970.00 1821.00 (ii) Unitemized ..... (iii) TOTAL of contributions 1420.00 4521.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 1420.00 4521.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 60000.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 60000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 417.92 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 1420.00 64938.92 (Carry Total to Line 24, page 4).....

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 24

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	15723.29	27956.88
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:  (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other	450.00	
	Than Political Committees	450.00	800.00
	(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 20(a), (b), and (c))	450.00	800.00
21.	OTHER DISBURSEMENTS	0.00	228.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	16173.29	28984.88
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	50727.33
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	1420.00
25.	SUBTOTAL (add Line 23 and Line 24)		52147.33
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	16173.29
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		35974.04

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

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

FOR LINE NUMBER:			: PAGE	5 OF	24
	(check only				
	X <sub>11a</sub>	11b	11c	11d	
	12	13a	13b	14	15

	and Statements may not be sold or used by any po g the name and address of any political committee			
NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGI	RESS			
Full Name (Last, First, Middle Initial)  Arlene Bowles				
A. Mailing Address 239 Lake Street		Date of Receipt		
City	03 02 2014			
Auburn	Transaction ID : SA11AI.4303			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer retired	Occupation retired	250.00		
Receipt For: 2014    Primary General Other (specify)	Election Cycle-to-Date 250.00			
Full Name (Last, First, Middle Initial)  Anne C Geller	·	Date of Receipt		
Mailing Address 108 Orchard Street		03 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Farmington	State Zip Code ME 04938	Transaction ID : SA11AI.4305		
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation	200.00		
Receipt For: 2014  Primary General  Other (specify)	Election Cycle-to-Date			
Full Name (Last, First, Middle Initial)		Date of Receipt		
C. Mailing Address		M M / D D / Y Y Y Y		
City	State Zip Code			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation			
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	_		
SUBTOTAL of Receipts This Page (optional	l)	450.00 450.00		

24 FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one) for each category of the Detailed Summary Page X 17 18 19a 19b 20a 20b 20c 21

	y information copied from such Reports and Statements may not be sold or used by any for commercial purposes, other than using the name and address of any political commit	
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS	
۹.	Full Name (Last, First, Middle Initial)  Data Bean  Mailing Address 44 Shaker Roadt	Date of Disbursement  03
	City State Zip Code Gray ME 04039  Purpose of Disbursement  Candidate Name Category Type  Office Sought: House Senate President President  State: District:	Amount of Each Disbursement this Period  250.00  Transaction ID: SB17.4357
3.	Full Name (Last, First, Middle Initial) rand Printing dale  Mailing Address 104 Washington Avenue  City State Zip Code Portland ME 04101	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Purpose of Disbursement printing cost  Candidate Name  Category Type  Office Sought:  Disbursement For: 2014  Senate  Primary  General	206.01 Transaction ID : SB17.4338
	State: District:  Full Name (Last, First, Middle Initial)  Democratic Party Maine  Mailing Address 320 Water Street	Date of Disbursement  M M M / D D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Van access reports  Candidate Name  Category Type  Office Sought: House Disbursement For: 2014	Amount of Each Disbursement this Period 781.25  Transaction ID : SB17.4336
	Senate President Other (specify)  State: District:  UBTOTAL of Disbursements This Page (optional)	1237.26
Т	OTAL This Period (last page this line number only)	

	Deta	ailed Summary	/ Page	20a 20b 20c 21
	ly information copied from such Reports and Statements may no for commercial purposes, other than using the name and address			
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS			
_	Full Name (Last, First, Middle Initial)			
۹.	Party Maine Democratic			Date of Disbursement
	Mailing Address 320 Water Street			01 07 2014
	• •	Zip Code		Amount of Each Disbursement this Period
	Augusta ME (Purpose of Disbursement	04330		731.25
	VÁN names charge			Transaction ID : SB17.4314
	Candidate Name		Category/ Type	
	Office Sought:  House Senate President  Disbursement For: 201  Primary Other (specify	General		
	State: District:			
3.	Full Name (Last, First, Middle Initial)  Carl E Pease			Date of Disbursement
	Mailing Address PO Box 213			01 28 2014
	•	Zip Code 04363		Amount of Each Disbursement this Period
	Purpose of Disbursement Vehicle gasoline reimbursement			60.00 Transaction ID : SB17.4320
	Candidate Name		Category/ Type	
	Office Sought:  House Senate President  Disbursement For: 20' Primary Other (specify  State:	General		
	Full Name (Last, First, Middle Initial)			
Э.	Carl E Pease			Date of Disbursement
	Mailing Address PO Box 213			01 31 2014
	City State Zip Coo Windsor ME 04363	de		Amount of Each Disbursement this Period
	Purpose of Disbursement vehicle gasoline reimbursement			40.00
	Candidate Name		Category/ Type	Transaction ID : SB17.4323
	Office Sought:    House   Disbursement For: 201	General	21.	
s	UBTOTAL of Disbursements This Page (optional)			831.25
т	OTAL This Period (last page this line number only)			
				7 7

**PAGE** 8 24 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Carl E Pease 2014 Mailing Address PO Box 213 02 04 City State Zip Code Amount of Each Disbursement this Period ME Windsor 04363 Purpose of Disbursement vehicle gasoline reimbursement 40.00 Transaction ID: SB17.4337 Candidate Name Category/ Type 2014 Office Sought: House Disbursement For: Senate Primary General

	0	President	Other (spe	ecity)		
_	State: Full Name (Last.	District: First, Middle Initial)				
В.	Carl E Daa	se				Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City Windsor		State ME	Zip Code 04363		Amount of Each Disbursement this Period
Purpose of Disbursement Vehicle gasoline reimbursement						100.00 Transaction ID : SB17.4344
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For:  Primary  Other (spe	General		
	State:	District:				
	Full Name (Last,	First, Middle Initial)				

c. Carl E Pease Date of Disbursement Mailing Address PO Box 213 02 2014 City State Zip Code Amount of Each Disbursement this Period 04363 Windsor ME Purpose of Disbursement Vehicle assoline reimbursement Transaction ID: SB17.4347 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Primary General Senate Other (specify)

State: District:											
CURTOTAL of Dishurasments This Dage (entions)						_		2	00.0	00	Ī
SUBTOTAL of Disbursements This Page (optional)											
TOTAL This Period (last page this line number only)	L	_	_	-5	_	_	- 1	 _	_	_	_

President

60.00

	Detailed Summa	ry Page	20a 20b 20c 21
	ly information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any pol		
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS		
	Full Name (Last, First, Middle Initial)		B . (B)
۹.	Carl E Pease		Date of Disbursement
	Mailing Address PO Box 213		03 14 2014
	City State Zip Code		Amount of Each Disbursement this Period
	Windsor ME 04363  Purpose of Disbursement  Monthly Stipped		250.00
	Monthly Stipend		Transaction ID : SB17.4359
	Candidate Name	Category/ Type	
	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)		
	State: District:		
3.	Full Name (Last, First, Middle Initial)  Carl E Pease		Date of Disbursement
	Mailing Address PO Box 213		03 / D D / Y Y Y Y Y Y 2014
	City State Zip Code		Amount of Each Disbursement this Period
	Windsor ME 04363	T	250.00
	Purpose of Disbursement Bonus		250.00 Transaction ID : SB17.4360
	Candidate Name	Category/ Type	
	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)  State:  District:		
	Full Name (Last, First, Middle Initial)		
Э.	Best Western Senator Inn		Date of Disbursement
	Mailing Address 284 Western Ave		02 03 7 7 7 7 7
	City State Zip Code		Amount of Each Disbursement this Period
	Augusta ME 04330 Purpose of Disbursement		278.98
	Room overnigts		
	Candidate Name	Category/ Type	Transaction ID : SB17.4377
	Office Sought:    House		
s	UBTOTAL of Disbursements This Page (optional)		778.98
Т	OTAL This Period (last page this line number only)		
-			7 7 -

TEMIZED DIOBOTIOEMENTO	Detailed Summar	y Page	20a 20b 20c 21
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRI	ESS		
Full Name (Last, First, Middle Initial)  Best Western Senator Inn  Mailing Address 284 Western Ave  City Augusta  Purpose of Disbursement Rent conference room  Candidate Name  Office Sought: House Senate President State: District:	State Zip Code ME 04330  Subursement For: Primary General Other (specify)	Category/ Type	Date of Disbursement  O2 10 2014  Amount of Each Disbursement this Period  452.60  Transaction ID: SB17.4339
Full Name (Last, First, Middle Initial)  Evan Sposato  Mailing Address 279 Somerset Ave			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pittsfield Purpose of Disbursement Salary  Candidate Name  Office Sought: House Dis Senate President	State Zip Code ME 04967  sbursement For: 2014  Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 500.00  Transaction ID : SB17.4313
State: District:  Full Name (Last, First, Middle Initial)  Evan Sposato  Mailing Address 279 Somerset Ave			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pittsfield Purpose of Disbursement Salary  Candidate Name  Office Sought: House Senate President State: District:	State Zip Code ME 04967  Sbursement For: 2014  Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 500.00  Transaction ID : SB17.4315
SUBTOTAL of Disbursements This Page (opti	onal)		1452.60

**PAGE** 11 24 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Evan Sposato 2014 Mailing Address 279 Somerset Ave 01 24 City State Zip Code Amount of Each Disbursement this Period MF Pittsfield 04967 Purpose of Disbursement 500.00 Salary Transaction ID: SB17.4327 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Evan Sposato Date of Disbursement Mailing Address 279 Somerset Ave 01 31 2014 City State Zip Code Amount of Each Disbursement this Period ME Pittsfield 04967 500.00 Purpose of Disbursement Salary Transaction ID: SB17.4329 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Evan Sposato Mailing Address 279 Somerset Ave 02 07 2014 City State Zip Code Amount of Each Disbursement this Period 04967 Pittsfield ME 500.00 Purpose of Disbursement Salary Transaction ID : SB17.4330 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House General Senate Primary President Other (specify) State: District: 1500.00 SUBTOTAL of Disbursements This Page (optional).....

TEMIZED DISBURSEMENTS	Detailed Summary		X 17 20a	18 20b	19a 20c	19b 21		
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a			son for the pu	rpose of solic	iting contribu	utions		
NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS	, F3					-		
Full Name (Last, First, Middle Initial)  A. Evan Sposato  Mailing Address 279 Somerset Ave	an Sposato							
City State Pittsfield ME  Purpose of Disbursement Salary	Zip Code 04967		Amount of	Each Disburse  D: SB17.434	500.0	-		
Candidate Name  Office Sought: House Disbursement For: Senate President Other (specific contents)  State: District:	General	Category/ Type						
Full Name (Last, First, Middle Initial)  Evan Sposato  Mailing Address 279 Somerset Ave	Full Name (Last, First, Middle Initial)  Evan Sposato					Y		
City State Pittsfield ME Purpose of Disbursement Salary  Candidate Name	Zip Code 04967	Category/ Type	Amount of Transaction	Each Disburse D : SB17.434	500.0	-		
Office Sought:  House Senate President  State:  Disbursement For: Primary Other (specific points)	General							
Full Name (Last, First, Middle Initial)  Evan Sposato  Mailing Address 279 Somerset Ave			Date of Dis	bursement	2014	4		
	General	Category/ Type	Amount of Transaction I	Each Disburso	500.0	-		
SUBTOTAL of Disbursements This Page (optional)					1500.0	00		

	FOR LINE	NUMBE	R:		PAGE	13	OF	24
Use separate schedule(s)	(check on	ly one)						
for each category of the Detailed Summary Page	X	17		18		19a		19k
Detailed Suffillary Fage		20a		20b		20c		21

	Detailed Summa	ry Page	20a 20b 20c 21						
	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) ALDEN SMITH FOR CONGRESS								
	Full Name (Last, First, Middle Initial)								
	Evan Sposato		Date of Disbursement						
	Mailing Address 279 Somerset Ave		03 07 2014						
	City State Zip Code		Amount of Each Disbursement this Period						
	Pittsfield ME 04967	T	500.00						
	Purpose of Disbursement Salary		Transaction ID : SB17.4351						
	Candidate Name	Category/ Type							
	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)								
	State: District:								
3.	Full Name (Last, First, Middle Initial)  Evan Sposato		Date of Disbursement						
	Mailing Address 279 Somerset Ave		03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City State Zip Code Pittsfield ME 04967		Amount of Each Disbursement this Period						
	Purpose of Disbursement Salary		500.00  Transaction ID : SB17.4355						
	Candidate Name	Category/ Type	Talloudini is 1 ds 17 17000						
	Office Sought:    House   Disbursement For: 2014								
	Full Name (Last, First, Middle Initial)								
	Evan Sposato		Date of Disbursement						
	Mailing Address 279 Somerset Ave		03 14 2014						
	City State Zip Code		Amount of Each Disbursement this Period						
	Pittsfield ME 04967	ı	2000 20						
	Purpose of Disbursement Bonus		2000.00 Transaction ID : SB17.4356						
	Candidate Name	Category/ Type							
	Office Sought:    House   Disbursement For: 2014   Primary   General Other (specify)								
S	SUBTOTAL of Disbursements This Page (optional)								
T	TOTAL This Period (last page this line number only)								

24 PAGE 14 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the Detailed Summary Page X 17 18 19a 19b 20a 20b 20c 21

	ly information copied from such Reports and Statements may not be sold or used by any per for commercial purposes, other than using the name and address of any political committee							
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS							
۹.	Full Name (Last, First, Middle Initial)  Augusta Staples  Mailing Address 14 Crossing Way	Date of Disbursement  O1 10 2014						
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Office upplies  Candidate Name  Category/ Type  Office Sought: House Senate President  State: District:  City State Zip Code ME 04330  Category/ Type  Category/ Type  Category/ Type  Category/ Type	Amount of Each Disbursement this Period 65.59  Transaction ID : SB17.4371						
3.	Full Name (Last, First, Middle Initial)  Augusta Staples  Mailing Address 14 Crossing Way	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Office supplies  Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2014	Amount of Each Disbursement this Period 5.93  Transaction ID: SB17.4375						
	Senate President Other (specify)  State: District:							
	Full Name (Last, First, Middle Initial)  Augusta Staples  Mailing Address 14 Crossing Way	Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement						
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Office supplies  Candidate Name  Category/ Type	Amount of Each Disbursement this Period 47.33  Transaction ID : SB17.4376						
	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)  State:  Disbursement For: 2014							
s	SUBTOTAL of Disbursements This Page (optional)							
T	TOTAL This Period (last page this line number only)							

Office Sought:

House

Senate

President

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

**PAGE** 15 OF 24 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Augusta Staples 2014 Mailing Address 14 Crossing Way 02 Zip Code City State Amount of Each Disbursement this Period ME Augusta 04330 Purpose of Disbursement Office Supplies 75.96 Transaction ID: SB17.4349 Candidate Name Category/ Type

	State:	Senate President District:	Primary Gener Other (specify)	al	
В.		First, Middle Initial)			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z
	City Augusta Purpose of Disbu Office supplies Candidate Name Office Sought:		State Zip Code ME 04330  Disbursement For: 2014	Category/ Type	Amount of Each Disbursement this Period 96.57  Transaction ID : SB17.4350
	State:	Senate President District:	Primary Gener Other (specify)	al	

2014

Disbursement For:

Full Name (Last, First, Middle Initial) Date of Disbursement c. Augusta Staples Mailing Address 14 Crossing Way 03 13 2014 City Zip Code State Amount of Each Disbursement this Period 04330 Augusta ME Purpose of Disbursement 105.49 Office supplies Transaction ID: SB17.4380 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House

State:	District:												
			_		_	_	_	_	_	2.	78.0	2	Ī
SUBTOTAL of	of Disbursements This Page	(optional)			- j	_	-	-	_		0.0.		l
TOTAL This I	Period (last page this line nu	ımber only)	 -	-	-5		-	-5-	_	_	-		
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General

Primary

Other (specify)

**PAGE** 16 24 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

19b 21 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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Ms Melissa Sterry 2014 Mailing Address 15 Thompson St 15 City State Zip Code Amount of Each Disbursement this Period MF Augusta 04330 Purpose of Disbursement 750.00 Monthly Stipend Transaction ID: SB17.4316 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Ms Melissa Sterry Date of Disbursement Mailing Address 15 Thompson St 01 15 2014 City State Zip Code Amount of Each Disbursement this Period ME 04330 Augusta 100.00 Purpose of Disbursement Cell Phone Transaction ID: SB17.4317 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement

C. Ms Melissa Sterry

Mailing Address 15 Thompson St City State Zip Code

Augusta ME 04330 Purpose of Disbursement sewer bill Candidate Name Category/ Type

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

Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify)

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

District:

2014 15

Amount of Each Disbursement this Period

50.00

Transaction ID: SB17.4318

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State:

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

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20a 20b 20c 21

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	y information copied from such Reports and Statements may not be sold or u for commercial purposes, other than using the name and address of any political purposes.		son for the purpose of soliciting contributions					
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS							
۹.	Full Name (Last, First, Middle Initial)  Ms Melissa Sterry  Mailing Address 15 Thompson St	Date of Disbursement  O1 15 2014						
	City State Zip Code Augusta ME 04330  Purpose of Disbursement electric bill		Amount of Each Disbursement this Period  50.00  Transaction ID : SB17.4319					
	Candidate Name  Office Sought: House Disbursement For: 2014 Senate President Other (specify)  State: District:	Category/ Type	Transaction ib . 3617.4319					
3.	Full Name (Last, First, Middle Initial)  Ms Melissa Sterry  Mailing Address 15 Thompson St		Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement					
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Monthly Stipend  Candidate Name  Office Sought: House Disbursement For: 2014	Category/ Type	Amount of Each Disbursement this Period 750.00  Transaction ID : SB17.4331					
	Senate President  State:  District:  Primary Other (specify)							
Э.	Full Name (Last, First, Middle Initial)  Ms Melissa Sterry  Mailing Address 15 Thompson St		Date of Disbursement					
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Electric bill  Candidate Name	Category/ Type	Amount of Each Disbursement this Period  50.00  Transaction ID: SB17.4332					
	Office Sought:  House Senate President  Disbursement For: 2014 Primary Other (specify)  State:							
s	SUBTOTAL of Disbursements This Page (optional)							
Т	OTAL This Period (last page this line number only)							

### SCHEDULE B (FEC Form 3)

**PAGE** 18 24 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Ms Melissa Sterry 2014 Mailing Address 15 Thompson St 02 03 City State Zip Code Amount of Each Disbursement this Period MF Augusta 04330 Purpose of Disbursement 50.00 Sewer bill Transaction ID: SB17.4333 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Ms Melissa Sterry Date of Disbursement Mailing Address 15 Thompson St 02 03 2014 City State Zip Code Amount of Each Disbursement this Period ME 04330 Augusta 0.00 Purpose of Disbursement Cell phone bill Transaction ID: SB17.4334 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Ms Melissa Sterry Mailing Address 15 Thompson St 02 03 2014 City State Zip Code Amount of Each Disbursement this Period Augusta ME 04330 Purpose of Disbursement 420.46 restaurant meals quest Transaction ID : SB17.4335 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify)

State: District: 470.46 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

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	y information copied from such Reports and Statements may not be sold or use for commercial purposes, other than using the name and address of any politic						
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial)  Ms Melissa Sterry  Mailing Address 15 Thompson St  City State Zip Code Augusta ME 04330  Purpose of Disbursement Monthly Stipend  Candidate Name  Office Sought: House Senate President  President  Disbursement For: 2014  Primary General Other (specify)	Category/ Type	Amo	ount of Ea	or Disburs: SB17.435	2014 ement this P 750.0	eriod
3.	State: District:  Full Name (Last, First, Middle Initial)  Ms Melissa Sterry  Mailing Address 15 Thompson St		М	e of Disbu	ursement	y y y y 2014	Y
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Electricity  Candidate Name  Office Sought: House Senate President  President  State Zip Code  ME 04330  Purpose of Disbursement For: 2014  Senate Primary General Other (specify)	Category/ Type			: SB17.435		-
Э.	Full Name (Last, First, Middle Initial)  Ms Melissa Sterry  Mailing Address 15 Thompson St		М		ursement 07	y y y 2014	Y
	City State Zip Code Augusta ME 04330  Purpose of Disbursement Cell phone expense  Candidate Name  Office Sought: House Senate President President  State: District:	Category/ Type		,	ach Disburs	ement this P	-
s	UBTOTAL of Disbursements This Page (optional)			<u> </u>		900.	00
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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.									
$\rangle$	NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS								
	Full Name (Last, First, Middle Initial)								
۸.	Ms Melissa Sterry	Date of Disbursement							
	Mailing Address 15 Thompson St	03 / 14 / 2014							
	City State Zip Code Augusta ME 04330	Amount of Each Disbursement this Period							
	Purpose of Disbursement	1000.00							
	bonus	Transaction ID : SB17.4361							
	Candidate Name Category/ Type								
	Office Sought:  House Senate President  Disbursement For: 2014  Primary Other (specify)								
	State: District: Full Name (Last, First, Middle Initial)								
Ms Melissa Sterry  Date of Disbursement									
Mailing Address 15 Thompson St									
	City State Zip Code	Amount of Each Disbursement this Period							
	Augusta ME 04330  Purpose of Disbursement	500.00							
	Bonus								
	Candidate Name Category/ Type	Transaction ID : SB17.4362							
	Office Sought:    House								
	Full Name (Last, First, Middle Initial)								
Э.	Store The UPS	Date of Disbursement							
	Mailing Address 499 Broadway Street	01 07 2014							
	City State Zip Code	Amount of Each Disbursement this Period							
	Bangor ME 04401	14.20							
	Purpose of Disbursement Forwarding Service	14.29							
	Candidate Name Category/ Type	Transaction ID : SB17.4367							
	Office Sought:  House Senate President  State:  Disbursement For: 2014  Primary Other (specify)  Other (specify)								
s	UBTOTAL of Disbursements This Page (optional)	1514.29							
Т	TOTAL This Period (last page this line number only)								

**PAGE** 21 24 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21

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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Store The UPS 2014 Mailing Address 499 Broadway Street 01 14 City State Zip Code Amount of Each Disbursement this Period ME Bangor 04401 Purpose of Disbursement 14.29 Forwarding Service Transaction ID: SB17.4374 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 14.29 SUBTOTAL of Disbursements This Page (optional)..... 15546.00

	FOR LINE NUM	BER:	PAGE	22	OF	24
Use separate schedule(s)	(check only one	)				
for each category of the Detailed Summary Page	17	18		19a		19b
Detailed Suffillary Fage	<b>X</b> 20a	20b	,	20c		21

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) ALDEN SMITH FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Arlene Bowles 2014 Mailing Address 239 Lake Street 03 14 Zip Code City State Amount of Each Disbursement this Period ME Auburn 04210 250.00 Purpose of Disbursement Transaction ID: SB20A.4384 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate General Primary President Other (specify) State: District: 250.00 SUBTOTAL of Disbursements This Page (optional)..... 250.00

### SCHEDULE C (FEC Form 3) LOANS

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

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13b Transaction ID: SC/10.4264 NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mr. Alden Smith General Mailing Address Other (specify)  $\blacktriangledown$ 499 BROADWAY SUITE 303 State ZIP Code City ME 04401 **BANGOR** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 10<sup>M</sup> 02 2013 11/30/2014 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

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**LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4265 NAME OF COMMITTEE (In Full) ALDEN SMITH FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mr. Alden Smith General Mailing Address Other (specify)  $\blacktriangledown$ 499 BROADWAY SUITE 303 State ZIP Code City ME 04401 **BANGOR** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 12<sup>M</sup> <sup>D</sup>30 2013 11/30/2014 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) ...... 60000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.