



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Maine Republican Party

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		42037.49
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	137482.84									
(c) Total Receipts (from Line 19) .....	180182.00	854334.70								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	317664.84	896372.19								
7. Total Disbursements (from Line 31) .....	101149.04	729101.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	216515.80	167270.49								
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) .....	33234.35									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Maine Republican Party

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7695.00	130690.62
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	10487.00	148148.07
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	18182.00	278838.69
(b) Political Party Committees .....	88000.00	380755.00
(c) Other Political Committees (such as PACs) .....	74000.00	194369.44
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	180182.00	853963.13
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	371.57
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	180182.00	854334.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	180182.00	854334.70

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1204.07	65761.09
(ii) Non-Federal Share.....	2140.55	116908.50
(b) Other Federal Operating Expenditures.....	97804.42	546432.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	101149.04	729101.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	101149.04	729101.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99008.49	612193.20

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	180182.00	853963.13
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	180182.00	853963.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	99008.49	612193.20
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	99008.49	612193.20

**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 6 / 51
	<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	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Tommy Adkins		Date of Receipt
	Mailing Address 364 Back Ridge Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Orland	ME	04472
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81006.C85853
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Arthur Alley		Date of Receipt
	Mailing Address 69 Lamoine Beach Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Lamoine	ME	04605
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81006.C85869
Name of Employer Self employed		Occupation Seamstress /Decorator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Anderson		Date of Receipt
	Mailing Address 186 Flying Point Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Freeport	ME	04032-6510
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81006.C85997
Name of Employer U. S. Navy		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
			Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 200.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 7 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Burnell & Diane Bailey

Mailing Address 54 Black Swan Drive

City State Zip Code  
South Berwick ME 03908

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      395.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 81006.C85814

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jeanne Begley

Mailing Address 94 Depot Street

City State Zip Code  
Waldoboro ME 04572-5902

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      215.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 0 8

**Transaction ID:** 81010.C86059

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Andrew Berube

Mailing Address 48 Woods Road

City State Zip Code  
Falmouth ME 04105

FEC ID number of contributing federal political committee. C

Name of Employer Self      Occupation

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 8

**Transaction ID:** 81006.C85837

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 175.00

**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: PAGE 8 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
James Bitner  
Mailing Address PO Box 610  
City State Zip Code  
Rockport ME 04856-0610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 8  
Transaction ID: 81006.C85861  
Amount of Each Receipt this Period 500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Millicent Bray  
Mailing Address 40 McLaughlin Circle  
City State Zip Code  
Chelsea ME 04330-1090  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 8  
Transaction ID: 81010.C86043  
Amount of Each Receipt this Period 105.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
George Brett  
Mailing Address 185 Charles E. Jordan Road  
City State Zip Code  
Cape Elizabeth ME 04107-2500  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 8  
Transaction ID: 81006.C85860  
Amount of Each Receipt this Period 400.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1005.00  
**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 / 51
	<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

**A.**

Full Name (Last, First, Middle Initial)  
John Bunton

Mailing Address 780 Mountain Road

City Parsonsfield State ME Zip Code 04047-6821

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 10 / 2008

Transaction ID: 81010.C86116

Amount of Each Receipt this Period 200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Edmund Buschmann

Mailing Address 80 Dyer Road

City Lewiston State ME Zip Code 04240

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

Name of Employer Owner Occupation E. A. Buschmann

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 06 / 2008

Transaction ID: 81006.C85919

Amount of Each Receipt this Period 100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Carnicelli

Mailing Address PO Box 1228  
545 York Street

City York Harbor State ME Zip Code 03911-1228

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

Name of Employer UNH Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 07 / 2008

Transaction ID: 81010.C86040

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 400.00

**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: PAGE 10 / 51  
(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.**

Full Name (Last, First, Middle Initial)  
Janis Cross

Mailing Address 28 High Street

City State Zip Code  
Hallowell ME 04347-1206

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

Name of Employer Occupation  
Self employed ED Cousutlant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
MM / DD / YYYY  
10 / 14 / 2008

Transaction ID: 81014.C86138

Amount of Each Receipt this Period  
50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Marjorie Davis

Mailing Address 6 Huckleberry Lane

City State Zip Code  
Augusta ME 04330

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
10 / 06 / 2008

Transaction ID: 81006.C85877

Amount of Each Receipt this Period  
400.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jennifer Duddy

Mailing Address 11 Crescent View Ave.

City State Zip Code  
Cape Elizabeth ME 04107

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

Name of Employer Occupation  
Sen. Collins office senior staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: 81010.C86130

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

**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: PAGE 11 / 51  
(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.**

Full Name (Last, First, Middle Initial)  
Jennifer Duddy

Mailing Address 11 Crescent View Ave.

City State Zip Code  
Cape Elizabeth ME 04107

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

Name of Employer Sen. Collins office Occupation senior staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 10 / 2008  
Transaction ID: 81010.C86129  
Amount of Each Receipt this Period 450.00  
Receipt

**B.**

Full Name (Last, First, Middle Initial)  
G. Clifton Eames

Mailing Address 17 Fairmount Park West

City State Zip Code  
Bangor ME 04401-5813

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

Name of Employer N H Bragg & Sons Occupation Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 06 / 2008  
Transaction ID: 81010.C86026  
Amount of Each Receipt this Period 50.00  
Receipt

**C.**

Full Name (Last, First, Middle Initial)  
David Elowitch

Mailing Address 81 Roaring Brook Road

City State Zip Code  
Portland ME 04103

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

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 06 / 2008  
Transaction ID: 81006.C86023  
Amount of Each Receipt this Period 200.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

**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: PAGE 12 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Robert Fuller

Mailing Address 79 Maple Ridge Drive

City Winthrop State ME Zip Code 04364-3427

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

Name of Employer Self employed Occupation Priv. Fiduciary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 03 / 2008  
Transaction ID: 81006.C85829  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Greenlee

Mailing Address 366 Grammar Road

City Sanford State ME Zip Code 04073

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2008  
Transaction ID: 81010.C86053  
Amount of Each Receipt this Period 75.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
George Hall

Mailing Address 1 John Deere Road

City Windham State ME Zip Code 04062-4836

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

Name of Employer Hall Implement Co Occupation Farm Equipment Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 08 / 2008  
Transaction ID: 81010.C86067  
Amount of Each Receipt this Period 100.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1175.00

**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: PAGE 13 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Fred Hardy

Mailing Address 879 Weeks Mills Road

City State Zip Code  
New Sharon ME 04955

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Retired

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 0 8

**Transaction ID:** 81010.C86056

Amount of Each Receipt this Period 25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Richard Harris

Mailing Address 35 Penrith Road

City State Zip Code  
Portland ME 04102-1605

FEC ID number of contributing federal political committee. C

Name of Employer Harris-Evans Assoc.      Occupation Partner

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

**Transaction ID:** 81006.C85912

Amount of Each Receipt this Period 500.00

Receipt

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

Mailing Address 52 Kelly Drive

City State Zip Code  
Sabattus ME 04280

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Retired

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 81006.C85805

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 625.00

**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: PAGE 14 / 51  
(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.** Full Name (Last, First, Middle Initial)  
Leonard Jacob

Mailing Address 35 Great Hill Road

City State Zip Code  
Kennebunk ME 04043

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1090.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	8

**Transaction ID:** 81006.C85906

Amount of Each Receipt this Period  
300.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Harold Jones

Mailing Address 99 Purinton Avenue

City State Zip Code  
Augusta ME 04330-4334

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

Name of Employer Fleet Bank of Maine      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      200.00

Date of Receipt  

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

**Transaction ID:** 81010.C86120

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Robert Jorgensen

Mailing Address 35-6 Webhannet Harbor Road

City State Zip Code  
Wells ME 04090

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	8

**Transaction ID:** 81006.C85862

Amount of Each Receipt this Period  
200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**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: PAGE 15 / 51

(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

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

NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
John Kaiser

Mailing Address 30 Maranacook Station Lane

City State Zip Code  
Winthrop ME 04364

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

Name of Employer Occupation  
ERA Webb Assoc. Real Estate Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: 81010.C86031

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Crosby Keay

Mailing Address PO Box 137

City State Zip Code  
Albion ME 04910-0007

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

Name of Employer Occupation  
H L Keay & Son Albion Retired Merchan

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: 81006.C85855

Amount of Each Receipt this Period

125.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Kevin Kendall

Mailing Address 5 Broad Street

City State Zip Code  
Falmouth ME 04105

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: 81006.C85955

Amount of Each Receipt this Period

100.00

Receipt

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

325.00

**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: PAGE 16 / 51  
(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

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

NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Kevin Kendall

Mailing Address 5 Broad Street

City Falmouth State ME Zip Code 04105

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 09 / 2008

Transaction ID: 81010.C86094

Amount of Each Receipt this Period 100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Catherine Leavitt

Mailing Address 338 Main Road

City East Eddington State ME Zip Code 04428-9715

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2008

Transaction ID: 81006.C85867

Amount of Each Receipt this Period 100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Catharine Lebowitz

Mailing Address 116 Silver Road

City Bangor State ME Zip Code 04401-5829

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 06 / 2008

Transaction ID: 81006.C85841

Amount of Each Receipt this Period 75.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 275.00

**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: PAGE 17 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Ellen Libby

Mailing Address PO box 810

City Ashland State ME Zip Code 04732-0810

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

Name of Employer Self employed Occupation Libbys Sporting Camps

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2008  
Transaction ID: 81006.C85976  
Amount of Each Receipt this Period 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Steven Lyons

Mailing Address 626 Straight Bay Road

City Lubec State ME Zip Code 04652

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

Name of Employer lyons market Occupation owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 07 / 2008  
Transaction ID: 81010.C86049  
Amount of Each Receipt this Period 200.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Wallace McGrew

Mailing Address 28 Westminster Terrace

City Cape Elizabeth State ME Zip Code 04107

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

Name of Employer Bushmaster Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2008  
Transaction ID: 81006.C85864  
Amount of Each Receipt this Period 35.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 335.00

**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: PAGE 18 / 51  
(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.** Full Name (Last, First, Middle Initial)  
Mary Margaret ODowd

Mailing Address 31 Valhall Pl.

City State Zip Code  
Milbridge ME 04658

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

Name of Employer MEMIC Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

**Transaction ID:** 81006.C86013

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Harry Rogers

Mailing Address 276 Summit Street

City State Zip Code  
Portland ME 04103-2252

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

**Transaction ID:** 81006.C85884

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
W. Thomas Sawyer

Mailing Address P.O. Box 179

City State Zip Code  
Bangor ME 04402

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

Name of Employer Waste Management Systems Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 81006.C85825

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

**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: PAGE 19 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Pembroke Schaeffer

Mailing Address 90 Crestview Lane

City Brunswick State ME Zip Code 04011-7372

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

Name of Employer Lockheed Martin Corp Occupation Program Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2008  
Transaction ID: 81006.C85875  
Amount of Each Receipt this Period 250.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Phyllis Siebert

Mailing Address PO Box 202

City Eastport State ME Zip Code 04631

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 412.00

Date of Receipt 10 / 09 / 2008  
Transaction ID: 81010.C86090  
Amount of Each Receipt this Period 100.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Cynthia C. Smith

Mailing Address 71 Free Street

City Old Town State ME Zip Code 04468

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

Name of Employer Angels Secure Networks, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2008  
Transaction ID: 81006.C85801  
Amount of Each Receipt this Period 250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 600.00

**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: PAGE 20 / 51  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Barbara Strout

Mailing Address 339 Windham Center Road

City State Zip Code  
Windham ME 04062-4336

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: 81006.C85956

Amount of Each Receipt this Period  
30.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Donald Wiswell

Mailing Address 93 River Road

City State Zip Code  
Orrington ME 04474-9726

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

Name of Employer Occupation  
Maine Test Borings Inc owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: 81006.C85887

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **130.00**

**TOTAL** This Period (last page this line number only) ..... ► **7695.00**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 51  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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.**

Full Name (Last, First, Middle Initial)  
House Republican Fund

Mailing Address P.O. Box 5629

City State Zip Code  
Augusta ME 04332

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2008

**Transaction ID:** 81015.C86162

Amount of Each Receipt this Period  
4000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Special Teams 08

Mailing Address P.O. Box 75103

City State Zip Code  
Washington DC 20013

FEC ID number of contributing federal political committee. **C** C00428920

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
94353.06

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2008

**Transaction ID:** 81015.C86163

Amount of Each Receipt this Period  
65000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Wal Pac

Mailing Address 702 SW 8th Street

City State Zip Code  
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C** C00342022

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 06 / 2008

**Transaction ID:** 81006.C85916

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>74000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>74000.00</b>

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

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

FOR LINE NUMBER: PAGE 22 / 51  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Republican National Committee  
Mailing Address 310 1st St SE  
City Washington State DC Zip Code 20003-1885  
FEC ID number of contributing federal political committee. **C** C00003418  
Name of Employer Republican National Committee Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 354500.00  
Date of Receipt 10 / 01 / 2008  
Transaction ID: 81006.C85797  
Amount of Each Receipt this Period 64000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Republican National Committee  
Mailing Address 310 1st St SE  
City Washington State DC Zip Code 20003-1885  
FEC ID number of contributing federal political committee. **C** C00003418  
Name of Employer Republican National Committee Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 363500.00  
Date of Receipt 10 / 10 / 2008  
Transaction ID: 81010.C86132  
Amount of Each Receipt this Period 9000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
South Carolina Republican Party  
Mailing Address 1913 Marion Street  
City Columbia State SC Zip Code 29201  
FEC ID number of contributing federal political committee. **C** C00034033  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00  
Date of Receipt 10 / 09 / 2008  
Transaction ID: 81010.C86115  
Amount of Each Receipt this Period 15000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 88000.00  
**TOTAL** This Period (last page this line number only) ..... ► 88000.00

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Avenue, SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement software support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6499</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.00"/></p> <p><b>SOFTWARE SUPPORT</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matthew Boucher</p> <p>Mailing Address 428 Bangor Road</p> <p>City Ellsworth State ME Zip Code 04605-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6474</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="719.47"/></p> <p><b>PAYROLL</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Robert Caverly</p> <p>Mailing Address 1509 River Road</p> <p>City Clinton State ME Zip Code 04927-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6478</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="699.47"/></p> <p><b>PAYROLL</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2168.94"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 51

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) City of Augusta	Transaction ID: 81017.E6510 Date of Disbursement 10 / 09 / 2008
	Mailing Address 16 Cony St.	Amount of Each Disbursement this Period 3000.00
	City Augusta State ME Zip Code 04330-	
	Purpose of Disbursement State convention space rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		STATE CONVENTION SPACE RE-NTAL

B.	Full Name (Last, First, Middle Initial) Michael Dailey	Transaction ID: 81017.E6476 Date of Disbursement 10 / 03 / 2008
	Mailing Address 152 East Broadway Ext	Amount of Each Disbursement this Period 739.47
	City Bangor State ME Zip Code 04401-	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Michelle Dale	Transaction ID: 81017.E6481 Date of Disbursement 10 / 03 / 2008
	Mailing Address 409 Churchill Road	Amount of Each Disbursement this Period 666.72
	City Augusta State ME Zip Code 04330-	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4406.19
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Thomas Dickens <hr/> Mailing Address 380 College Ave <hr/> City Orono State ME Zip Code 04473- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81017.E6479 Date of Disbursement 10 / 03 / 2008	Amount of Each Disbursement this Period 233.73 <hr/> PAYROLL
B.	Full Name (Last, First, Middle Initial) Kristen Dorion <hr/> Mailing Address 116 Halifax St <hr/> City Winslow State ME Zip Code 04901-6935 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81017.E6473 Date of Disbursement 10 / 03 / 2008	Amount of Each Disbursement this Period 866.71 <hr/> PAYROLL
C.	Full Name (Last, First, Middle Initial) Mark Ellis <hr/> Mailing Address 49 State Street <hr/> City Augusta State ME Zip Code 04330-4537 <hr/> Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81017.E6464 Date of Disbursement 10 / 02 / 2008	Amount of Each Disbursement this Period 460.24 <hr/> REIMBURSEMENT: SEE BELOW

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

1560.68

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.

Full Name (Last, First, Middle Initial)  
Dead River

Mailing Address 216 Eastern Ave

City Augusta State ME Zip Code 04330-5928

Purpose of Disbursement  
GAS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81017.E6465  
Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

86.24

[MEMO ITEM]  
MEMO: GAS

B.

Full Name (Last, First, Middle Initial)  
Maine Turnpike Authority

Mailing Address State Street

City Augusta State ME Zip Code 04330-

Purpose of Disbursement  
TOLLS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81017.E6467  
Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

2.50

[MEMO ITEM]  
MEMO: TOLLS

C.

Full Name (Last, First, Middle Initial)  
Uhaul

Mailing Address 47 Western Ave

City Augusta State ME Zip Code 04330-

Purpose of Disbursement  
TRUCK RENTAL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81017.E6466  
Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

371.51

[MEMO ITEM]  
MEMO: TRUCK RENTAL

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) FLS Connect  Mailing Address 2401 W Behrend Dr Ste 7 Suite 7  City Phoenix State AZ Zip Code 85027-4143  Purpose of Disbursement Get out the Vote Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81017.E6500 <b>Date of Disbursement</b> 10 / 02 / 2008  Amount of Each Disbursement this Period 2000.00  GET OUT THE VOTE	
<b>B.</b>	Full Name (Last, First, Middle Initial) FLS Connect  Mailing Address 2401 W Behrend Dr Ste 7 Suite 7  City Phoenix State AZ Zip Code 85027-4143  Purpose of Disbursement telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81017.E6462 <b>Date of Disbursement</b> 10 / 02 / 2008  Amount of Each Disbursement this Period 41.91  TELEPHONE	
<b>C.</b>	Full Name (Last, First, Middle Initial) FLS Connect  Mailing Address 2401 W Behrend Dr Ste 7 Suite 7  City Phoenix State AZ Zip Code 85027-4143  Purpose of Disbursement Get out the Vote Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81017.E6482 <b>Date of Disbursement</b> 10 / 05 / 2008  Amount of Each Disbursement this Period 9054.30  GET OUT THE VOTE	

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

11096.21

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 81017.E6516 Date of Disbursement 10 / 09 / 2008
	Mailing Address 2401 W Behrend Dr Ste 7 Suite 7	Amount of Each Disbursement this Period 1731.85
	City Phoenix State AZ Zip Code 85027-4143	
	Purpose of Disbursement Get out the Vote	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GET OUT THE VOTE

B.	Full Name (Last, First, Middle Initial) InforMe	Transaction ID: 81017.E6463 Date of Disbursement 10 / 02 / 2008
	Mailing Address One Market Square, Suite 102	Amount of Each Disbursement this Period 15699.97
	City Augusta State ME Zip Code 04330-	
	Purpose of Disbursement State of Maine voter list	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		STATE OF MAINE VOTER LIST

C.	Full Name (Last, First, Middle Initial) Gregg Lovely	Transaction ID: 81017.E6495 Date of Disbursement 10 / 09 / 2008
	Mailing Address PO Box 36	Amount of Each Disbursement this Period 1500.00
	City Newport State ME Zip Code 04953-	
	Purpose of Disbursement Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		RENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	18931.82
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Julie A. OBrien	Transaction ID: 81017.E6480 Date of Disbursement 10 / 03 / 2008
	Mailing Address 12 Myrtle St	Amount of Each Disbursement this Period 1577.03
	City Augusta State ME Zip Code 04330-4709	
	Purpose of Disbursement Payroll - non FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL - NON FEA

B.	Full Name (Last, First, Middle Initial) Pizza Hut	Transaction ID: 81017.E6496 Date of Disbursement 10 / 09 / 2008
	Mailing Address Forest Avenue	Amount of Each Disbursement this Period 500.00
	City Portland State ME Zip Code 04101-	
	Purpose of Disbursement food for volunteers Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FOOD FOR VOLUNTEERS

C.	Full Name (Last, First, Middle Initial) Benjamin Poulos	Transaction ID: 81017.E6471 Date of Disbursement 10 / 03 / 2008
	Mailing Address 10 Robinson Drive	Amount of Each Disbursement this Period 945.59
	City Rockport State ME Zip Code 04856-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3022.62
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Joseph Prevost</p> <p>Mailing Address 375 E. Bridge Street</p> <p>City Westbrook State ME Zip Code 04092-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6472</p> <p>Date of Disbursement 10 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 953.44</p> <p><b>PAYROLL</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Joseph Prevost</p> <p>Mailing Address 375 E. Bridge Street</p> <p>City Westbrook State ME Zip Code 04092-</p> <p>Purpose of Disbursement REIMBURSEMENT: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6518</p> <p>Date of Disbursement 10 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 349.48</p> <p><b>REIMBURSEMENT: SEE BELOW</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Hannaford Super Market</p> <p>Mailing Address 295 Forest Avenue</p> <p>City Portland State ME Zip Code 04101-</p> <p>Purpose of Disbursement FOOD FOR VOLUNTEERS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6520</p> <p>Date of Disbursement 10 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 58.29</p> <p><b>[MEMO ITEM]</b> MEMO: FOOD FOR VOLUNTEERS</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1302.92</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Hannaford Super Market Mailing Address 295 Forest Avenue City Portland State ME Zip Code 04101- Purpose of Disbursement FOOD FOR VOLUNTEERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81017.E6521 Date of Disbursement 10 / 09 / 2008
	Amount of Each Disbursement this Period 28.79 [MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS

<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Prevost Mailing Address 375 E. Bridge Street City Westbrook State ME Zip Code 04092- Purpose of Disbursement MILEAGE REIMBURSEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81017.E6519 Date of Disbursement 10 / 09 / 2008
	Amount of Each Disbursement this Period 262.40 [MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT

<b>C.</b> Full Name (Last, First, Middle Initial) PrimeSigns Mailing Address 925 University Ave #B City Sacramento State CA Zip Code 95825- Purpose of Disbursement Yard signs for candidates Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81017.E6501 Date of Disbursement 10 / 02 / 2008
	Amount of Each Disbursement this Period 16004.00 YARD SIGNS FOR CANDIDATES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	16004.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Michael Quatrano	Transaction ID: 81017.E6477 Date of Disbursement 10 / 03 / 2008
	Mailing Address 50 Webbs Mills Rd	Amount of Each Disbursement this Period 932.58
	City Casco State ME Zip Code 04015-4118	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Michael Quatrano	Transaction ID: 81017.E6527 Date of Disbursement 10 / 09 / 2008
	Mailing Address 50 Webbs Mills Rd	Amount of Each Disbursement this Period 500.19
	City Casco State ME Zip Code 04015-4118	
	Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT: SEE BELOW

C.	Full Name (Last, First, Middle Initial) Colluccis Sandwich Chop	Transaction ID: 81017.E6529 Date of Disbursement 10 / 09 / 2008
	Mailing Address 135 Congress St	Amount of Each Disbursement this Period 8.84
	City Portland State ME Zip Code 04101-	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: MEALS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1432.77
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Dunkin Donuts	Transaction ID: 81017.E6531 Date of Disbursement 10 / 09 / 2008
	Mailing Address 546 Deering Ave	Amount of Each Disbursement this Period 14.40
	City Portland State ME Zip Code 04103-	
	Purpose of Disbursement MEALS	[MEMO ITEM] MEMO: MEALS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Michael Quatrano	Transaction ID: 81017.E6528 Date of Disbursement 10 / 09 / 2008
	Mailing Address 50 Webbs Mills Rd	Amount of Each Disbursement this Period 471.60
	City Casco State ME Zip Code 04015-4118	
	Purpose of Disbursement MILEAGE REIMBURSEMENT	[MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Subway Sandwich Shop	Transaction ID: 81017.E6530 Date of Disbursement 10 / 09 / 2008
	Mailing Address 295 Forest Ave	Amount of Each Disbursement this Period 5.35
	City Portland State ME Zip Code 04103-	
	Purpose of Disbursement MEALS	[MEMO ITEM] MEMO: MEALS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Ryann Rousseau	Transaction ID: 81017.E6497 Date of Disbursement 10 / 09 / 2008
	Mailing Address P. O. Box 905	
	City Lewiston State ME Zip Code 04243-	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement Rent	Category/ Type RENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Savings Bank of Maine	Transaction ID: 81017.E6483 Date of Disbursement 10 / 09 / 2008
	Mailing Address P. O. Box 190	
	City Gardiner State ME Zip Code 04345-	Amount of Each Disbursement this Period 3570.02
	Purpose of Disbursement Payroll taxes	Category/ Type PAYROLL TAXES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Savings Bank of Maine	Transaction ID: 81022.E6546 Date of Disbursement 10 / 15 / 2008
	Mailing Address P. O. Box 190	
	City Gardiner State ME Zip Code 04345-	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement wire transfer fees	Category/ Type WIRE TRANSFER FEES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4300.02
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Simones Hot Dog Stand	Transaction ID: 81017.E6498 Date of Disbursement 10 / 09 / 2008
	Mailing Address 99 Chestnut Street	Amount of Each Disbursement this Period 500.00
	City Lewiston State ID ME Zip Code 04240-	
	Purpose of Disbursement food for volunteers	FOOD FOR VOLUNTEERS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Melissa Simones	Transaction ID: 81017.E6475 Date of Disbursement 10 / 03 / 2008
	Mailing Address 53 Buffie Lane	Amount of Each Disbursement this Period 1036.69
	City Greene State ID ME Zip Code 04236-	
	Purpose of Disbursement Payroll	PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Melissa Simones	Transaction ID: 81017.E6522 Date of Disbursement 10 / 09 / 2008
	Mailing Address 53 Buffie Lane	Amount of Each Disbursement this Period 64.96
	City Greene State ID ME Zip Code 04236-	
	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	REIMBURSEMENT: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1601.65
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Fortiers Security Center	Transaction ID: 81017.E6524 Date of Disbursement 10 / 09 / 2008
	Mailing Address 79 Chestnut St	Amount of Each Disbursement this Period 5.04
	City Lewiston State ID ME Zip Code 04240-	
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Melissa Simones	Transaction ID: 81017.E6523 Date of Disbursement 10 / 09 / 2008
	Mailing Address 53 Buffie Lane	Amount of Each Disbursement this Period 2.37
	City Greene State ID ME Zip Code 04236-	
	Purpose of Disbursement MILEAGE REIMBURSEMENT	[MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: 81017.E6525 Date of Disbursement 10 / 09 / 2008
	Mailing Address 49 Ash Street	Amount of Each Disbursement this Period 3.61
	City Lewiston State ID ME Zip Code 04240-	
	Purpose of Disbursement POSTAGE TO MAIL INFO TO H	[MEMO ITEM] MEMO: POSTAGE TO MAIL INFO TO H
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Walmart	Transaction ID: 81017.E6526 Date of Disbursement 10 / 09 / 2008
	Mailing Address 100 Mount Auburn Ave	Amount of Each Disbursement this Period 53.94
	City Auburn State ME Zip Code 04210-	
	Purpose of Disbursement FOOD FOR VOLUNTEERS	[MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Southwest Publishing	Transaction ID: 81017.E6502 Date of Disbursement 10 / 02 / 2008
	Mailing Address 2600 NW Topeka Blvd	Amount of Each Disbursement this Period 5638.80
	City Topeka State KS Zip Code 66617-	
	Purpose of Disbursement Maine GOP fundraising letter	MAINE GOP FUNDRAISING LET- TER
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Southwest Publishing	Transaction ID: 81017.E6514 Date of Disbursement 10 / 09 / 2008
	Mailing Address 2600 NW Topeka Blvd	Amount of Each Disbursement this Period 3919.86
	City Topeka State KS Zip Code 66617-	
	Purpose of Disbursement Maine GOP Fundraising letter	MAINE GOP FUNDRAISING LET- TER
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9558.66
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.

Full Name (Last, First, Middle Initial)  
Steve Brown Direct Mail, Inc.

Transaction ID: 81017.E6503  
Date of Disbursement

Mailing Address 731 Divot Drive

/   /

City Fernley State NV Zip Code 89408-

Amount of Each Disbursement this Period

Purpose of Disbursement  
Maine GOP personal fundraising lett  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

MAINE GOP PERSONAL FUNDRAISING LETT

B.

Full Name (Last, First, Middle Initial)  
Stoneridge Group, LL

Transaction ID: 81017.E6504  
Date of Disbursement

Mailing Address 554 West Main St  
Building A Suite 200

/   /

City Buford State GA Zip Code 30518-

Amount of Each Disbursement this Period

Purpose of Disbursement  
McCain door hangers  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

MCCAIN DOOR HANGERS

C.

Full Name (Last, First, Middle Initial)  
Time Warner Cable

Transaction ID: 81017.E6468  
Date of Disbursement

Mailing Address PO Box 9148

/   /

City Chelsea State MA Zip Code 02150-9148

Amount of Each Disbursement this Period

Purpose of Disbursement  
Utilities - cable  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

UTILITIES - CABLE

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jennifer Webber</p> <p>Mailing Address 8 Plymouth Road</p> <p>City South Portland State ME Zip Code 04106-</p> <p>Purpose of Disbursement campaign consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6469</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>CATEGORY/ Type CAMPAIGN CONSULTANT</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Andrew Worcester</p> <p>Mailing Address 33 Duane Drive</p> <p>City Liberty State ME Zip Code 04949-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6470</p> <p>Date of Disbursement 10 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 1240.62</p> <p>CATEGORY/ Type PAYROLL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Andrew Worcester</p> <p>Mailing Address 33 Duane Drive</p> <p>City Liberty State ME Zip Code 04949-</p> <p>Purpose of Disbursement REIMBURSEMENT: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E6484</p> <p>Date of Disbursement 10 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1249.66</p> <p>CATEGORY/ Type REIMBURSEMENT: SEE BELOW</p>

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

4490.28

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Best Buy Mailing Address 45 Bangor Mall Blvd City Bangor State ME Zip Code 04401-	Transaction ID: 81017.E6487 Date of Disbursement 10 / 09 / 2008
	Amount of Each Disbursement this Period 25.19 [MEMO ITEM] MEMO: OFFICE SUPPLIES
Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Irving Oil Mailing Address 489 Broadway City Bangor State ME Zip Code 04401-	Transaction ID: 81017.E6486 Date of Disbursement 10 / 09 / 2008
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO: PRIZE FOR VOLUNTEERS
Purpose of Disbursement PRIZE FOR VOLUNTEERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Pats Pizza Mailing Address 11 Mill Street City Orono State ME Zip Code 04473-	Transaction ID: 81017.E6488 Date of Disbursement 10 / 09 / 2008
	Amount of Each Disbursement this Period 31.95 [MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS
Purpose of Disbursement FOOD FOR VOLUNTEERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Pats Pizza	Transaction ID: 81017.E6493
	Mailing Address 11 Mill Street	Date of Disbursement 10 / 09 / 2008
	City Orono State ME Zip Code 04473-	Amount of Each Disbursement this Period 38.52
	Purpose of Disbursement FOOD FOR VOLUNTEERS	[MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 81017.E6492
	Mailing Address 47 Haskell Road Bangor	Date of Disbursement 10 / 09 / 2008
	City Bangor State ME Zip Code 04401-	Amount of Each Disbursement this Period 182.27
	Purpose of Disbursement FOOD FOR VOLUNTEERS	[MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 81017.E6485
	Mailing Address 47 Haskell Road Bangor	Date of Disbursement 10 / 09 / 2008
	City Bangor State ME Zip Code 04401-	Amount of Each Disbursement this Period 121.73
	Purpose of Disbursement FOOD FOR VOLUNTEERS	[MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.	Full Name (Last, First, Middle Initial) Stamps.Com	Transaction ID: 81017.E6491
	Mailing Address 12959 Coral Tree Place	Date of Disbursement 10 / 09 / 2008
	City Los Angeles State CA Zip Code 90066-	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement POSTAGE TO MAIL INFO TO H	[MEMO ITEM] MEMO: POSTAGE TO MAIL INFO TO H
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Stamps.Com	Transaction ID: 81017.E6489
	Mailing Address 12959 Coral Tree Place	Date of Disbursement 10 / 09 / 2008
	City Los Angeles State CA Zip Code 90066-	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement POSTAGE TO MAIL INFO TO H	[MEMO ITEM] MEMO: POSTAGE TO MAIL INFO TO H
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Stamps.Com	Transaction ID: 81017.E6490
	Mailing Address 12959 Coral Tree Place	Date of Disbursement 10 / 09 / 2008
	City Los Angeles State CA Zip Code 90066-	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement POSTAGE TO MAIL INFO TO H	[MEMO ITEM] MEMO: POSTAGE TO MAIL INFO TO H
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 51

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

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NAME OF COMMITTEE (In Full)  
Maine Republican Party

A.

Full Name (Last, First, Middle Initial)  
Andrew Worcester

Mailing Address 33 Duane Drive

City State Zip Code  
Liberty ME 04949-

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81017.E6494

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	0		0	9		2	0	0	8

Amount of Each Disbursement this Period

300.00
--------

**[MEMO ITEM]**

MEMO: MILEAGE REIMBURSEMENT

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

0.00

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

97804.42

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

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

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

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Bangor Letter Shop, Inc.			Nature of Debt (Purpose): Fundraising Letter
Mailing Address 99 Washington Street			
City Bangor	State ME	ZIP Code 04401-6518	

Outstanding Balance Beginning This Period 21738.11		<b>Transaction ID:</b> LS70127.E5104	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21738.11	

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

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

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	23311.99
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Donna Miller			Nature of Debt (Purpose): Volunteer
Mailing Address 80 Trues Pond Road			
City Liberty	State ME	ZIP Code 04949-	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>		<b>Transaction ID: LS70127.E5087</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="50.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="2905.54"/>		<b>Transaction ID: LS70127.E5085</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="2905.54"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="103.75"/>		<b>Transaction ID: LS70428.E5222</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="103.75"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="3059.29"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) 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 46 / 51
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="3057.10"/>	<b>Transaction ID:</b> LS70127.E5105	
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="3057.10"/>

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

Outstanding Balance Beginning This Period <input type="text" value="314.60"/>	<b>Transaction ID:</b> LS80129.E5665	
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="314.60"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor GOP Mail & Print	Nature of Debt (Purpose): Direct Mail
Mailing Address 95 Eddy Rd Ste 101 Suite 101	
City Manchester State NH ZIP Code 03102-3258	

Outstanding Balance Beginning This Period <input type="text" value="749.44"/>	<b>Transaction ID:</b> LS70127.E5089	
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="749.44"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="4121.14"/>
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)

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
Maine Republican Party

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

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

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Southwest Publishing			Nature of Debt (Purpose): Printing and Mailing
Mailing Address 2600 NW Topeka Blvd			
City Topeka	State KS	ZIP Code 66617-	

Outstanding Balance Beginning This Period		<b>Transaction ID: LS80129.E5669</b>	
2682.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2682.50	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2741.93
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	33234.35
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)	▶	33234.35

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Transco			Type of Allocated Activity: <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 10 Capitol Street			Allocated Activity or Event Year-To-Date 179541.63		
City Nashua	State NH	Zip Code 03063-	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: office supplies			Transaction ID: H481017.E6505		
Activity or Event Identifier: ADMINISTRATION B 2			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.00		138.66		216.66

<b>B. Full Name (Last, First, Middle Initial)</b> Unicel			Type of Allocated Activity: <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 P O Box 100			Allocated Activity or Event Year-To-Date 180467.62		
City Des Moines	State IA	Zip Code 50940-	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: telephone			Transaction ID: H481017.E6506		
Activity or Event Identifier: ADMINISTRATION B 2			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.00		255.99		399.99

<b>C. Full Name (Last, First, Middle Initial)</b> Augusta Post Office			Type of Allocated Activity: <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 40 Western Avenue			Allocated Activity or Event Year-To-Date 180067.63		
City Augusta	State ME	Zip Code 04330-	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: postage - bulk mail permit			Transaction ID: H481017.E6507		
Activity or Event Identifier: ADMINISTRATION B 2			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.00		256.00		400.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
366.00		650.65		1016.65

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Maine Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Augusta Post Office

Mailing Address  
40 Western Avenue

City	State	Zip Code
Augusta	ME	04330-

Purpose of Disbursement:  
postage - stampe

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

179667.63

Activity or Event Identifier:  
ADMINISTRATION B 2

Date 

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

Transaction ID: H481017.E6508

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.36		80.64		126.00

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

Mailing Address  
P. O. Box 190

City	State	Zip Code
Gardiner	ME	04345-

Purpose of Disbursement:  
payroll taxes - non FEA

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

182663.59

Activity or Event Identifier:  
ADMINISTRATION B 2

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	8

Transaction ID: H481017.E6509

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
568.09		1009.93		1578.02

**C. Full Name (Last, First, Middle Initial)**  
Great Works Internet

Mailing Address  
8 Pomerleau St

City	State	Zip Code
Biddeford	ME	04005-9403

Purpose of Disbursement:  
Utilities - cable

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

181085.57

Activity or Event Identifier:  
ADMINISTRATION B 2

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	8

Transaction ID: H481017.E6511

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.98		31.97		49.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
631.43		1122.54		1753.97

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Riverside Disposal			Type of Allocated Activity: <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 PO Box 2335			Allocated Activity or Event Year-To-Date 180537.62	
City Augusta	State ME	Zip Code 04338-2335	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H481017.E6512	
Purpose of Disbursement: Utilities - trash removal				
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		44.80		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Seacoast Security & Tele.			Type of Allocated Activity: <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 PO Box A			Allocated Activity or Event Year-To-Date 180651.62	
City West Rockport	State ME	Zip Code 04865-	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H481017.E6513	
Purpose of Disbursement: Security				
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.04		72.96		114.00

<b>C. Full Name (Last, First, Middle Initial)</b> Augusta Post Office			Type of Allocated Activity: <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 40 Western Avenue			Allocated Activity or Event Year-To-Date 180951.62	
City Augusta	State ME	Zip Code 04330-	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H481017.E6515	
Purpose of Disbursement: postage				
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.00		192.00		300.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.24		309.76		484.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Maine Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Augusta Post Office			Type of Allocated Activity: <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 40 Western Avenue			Allocated Activity or Event Year-To-Date 181035.62		
City Augusta	State ME	Zip Code 04330-	Date MM / DD / YYYY 10 / 09 / 2008		
Purpose of Disbursement: postage			Transaction ID: H481017.E6517		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.24		53.76		84.00

<b>B. Full Name (Last, First, Middle Initial)</b> Savings Bank of Maine			Type of Allocated Activity: <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 P. O. Box 190			Allocated Activity or Event Year-To-Date 182669.59		
City Gardiner	State ME	Zip Code 04345-	Date MM / DD / YYYY 10 / 15 / 2008		
Purpose of Disbursement: wire transfer fees			Transaction ID: H481022.E6547		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.16		3.84		6.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.40		57.60		90.00

**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
1204.07		2140.55		3344.62