

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MAINE REPUBLICAN PARTY

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="54222.66"/>	<input type="text" value="54222.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="243347.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="121149.50"/>	<input type="text" value="830359.63"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="364497.09"/>	<input type="text" value="884582.29"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35676.70"/>	<input type="text" value="555761.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="328820.39"/>	<input type="text" value="328820.39"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MAINE REPUBLICAN PARTY

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y 10 / 15 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10656.50	224348.50
(ii) Unitemized	5493.00	118153.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16149.50	342502.47
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	140175.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16149.50	482677.47
12. Transfers From Affiliated/Other Party Committees.....	105000.00	224500.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	123182.16
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	123182.16
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	121149.50	830359.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	121149.50	707177.47

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	4570.89	73894.91
(ii) Non-Federal Share.....	17195.37	277985.76
(b) Other Federal Operating Expenditures	9785.33	60016.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	31551.59	411897.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	26484.64
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	35.00
(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	35.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	4125.11	117345.11
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	4125.11	117345.11
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35676.70	555761.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18481.33	277776.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	16149.50	482677.47
34. Total Contribution Refunds (from Line 28(d))	0.00	35.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16149.50	482642.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	14356.22	133911.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14356.22	133911.39

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

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

FOR LINE NUMBER: PAGE 6 OF 37
(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. MR. CHRISTIAN BISHOP
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 PATTENWOODS LANE
 City LITCHFIELD State ME Zip Code 04350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CASCO BAY WEALTH ADVISORS Occupation FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : SA11AI.10927
 Amount of Each Receipt this Period
 250.00

B. MR. DANIEL BURCHSTEAD
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 151
 City SEBASCO ESTATES State ME Zip Code 04565
 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 Y
 10 / 06 / 2014
Transaction ID : SA11AI.10811
 Amount of Each Receipt this Period
 100.00

C. MR. STEPHEN BURNS
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 CUSHING ROAD
 City FRIENDSHIP State ME Zip Code 04547
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 08 / 2014
Transaction ID : SA11AI.10888
 Amount of Each Receipt this Period
 150.00

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: (check only one)	PAGE 7 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. MS. CYNTHIA BUSH		Date of Receipt
Mailing Address 152 GURNET LANDING ROAD		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City HARPSWELL	State ME	Zip Code 04079
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10824
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="305.00"/>	

Full Name (Last, First, Middle Initial) B. MR. GEORGE COCHRANE		Date of Receipt
Mailing Address PO BOX 191		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City SOUTHPORT	State ME	Zip Code 04576
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10754
Name of Employer HOMEMAKER		Amount of Each Receipt this Period
Occupation HOMEMAKER		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) C. KIMBERLY COUCH		Date of Receipt
Mailing Address 17 INDIAN WAY		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City FALMOUTH	State ME	Zip Code 04105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10940
Name of Employer VERRILL DANA LLP		Amount of Each Receipt this Period
Occupation ATTORNEY		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="380.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL 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: (check only one)	PAGE 8 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. THOMAS CURTIS		Date of Receipt
Mailing Address PO BOX 207		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORWAY	ME	04268
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10801
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2176.50"/>	

Full Name (Last, First, Middle Initial) B. THOMAS CURTIS		Date of Receipt
Mailing Address PO BOX 207		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORWAY	ME	04268
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10951
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2676.50"/>	

Full Name (Last, First, Middle Initial) C. MR. JOHN DIPRETORO		Date of Receipt
Mailing Address 65 DIPRETORO LANE		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
HARRISON	ME	04040
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10863
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="850.00"/>
TOTAL 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: (check only one)	PAGE 9 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. LAWRENCE DWIGHT		Date of Receipt
Mailing Address 46 PARSONS BEACH RD		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City State Zip Code KENNEBUNK ME 04043		Transaction ID : SA11AI.10858
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer DWIGHT INVESTMENT COUNCIL	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="995.00"/>	

Full Name (Last, First, Middle Initial) B. LAWRENCE DWIGHT		Date of Receipt
Mailing Address 46 PARSONS BEACH RD		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code KENNEBUNK ME 04043		Transaction ID : SA11AI.10895
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer DWIGHT INVESTMENT COUNCIL	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1245.00"/>	

Full Name (Last, First, Middle Initial) C. MRS. MARGARET FENDERSON		Date of Receipt
Mailing Address 17 STONY RIDGE RD		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City State Zip Code CUMBERLAND FORESIDE ME 04110		Transaction ID : SA11AI.10948
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 10 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. JOHN FRARY		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 Transaction ID : SA11AI.10938
Mailing Address 355 RED SCHOOLHOUSE ROAD		Amount of Each Receipt this Period 30.00
City FARMINGTON	State ME	Zip Code 04938
FEC ID number of contributing federal political committee.	C	
Name of Employer MOUNT OLYMPUS, INC.	Occupation STENTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 445.00	

Full Name (Last, First, Middle Initial) B. MR. EDWARD GERRY		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 Transaction ID : SA11AI.10925
Mailing Address P.O. BOX 765		Amount of Each Receipt this Period 250.00
City SOUTH FREEPORT	State ME	Zip Code 04078
FEC ID number of contributing federal political committee.	C	
Name of Employer STS LLC	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MS. CATE GILBANE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 03 / 2014 Transaction ID : SA11AI.10833
Mailing Address 364 BENEFIT STREET		Amount of Each Receipt this Period 2500.00
City PROVIDENCE	State RI	Zip Code 02903-2923
FEC ID number of contributing federal political committee.	C	
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	2780.00
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 11 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. JOHN GREENLEE		Date of Receipt
Mailing Address 366 GRAMMAR RD		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
SANFORD	ME	04073
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10810
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ARN HEGGERS		Date of Receipt
Mailing Address 15 MINUTEMAN DR		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
SCARBOROUGH	ME	04074
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10935
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MALCOLM HENRY		Date of Receipt
Mailing Address 24 MOOSE ALY		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
HARPSWELL	ME	04079
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10729
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="700.00"/>
TOTAL 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: (check only one)	PAGE 12 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. KENNETH HUOTARI			Date of Receipt 10 / 01 / 2014 Transaction ID : SA11AI.10757
Mailing Address PO BOX 304			Amount of Each Receipt this Period 50.00
City TEMPLE	State ME	Zip Code 04984	
FEC ID number of contributing federal political committee. C			
Name of Employer RICHARD CARRIER TK, INC.	Occupation TRUCK DRIVER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. MS. EVELYN JOOST			Date of Receipt 10 / 07 / 2014 Transaction ID : SA11AI.10839
Mailing Address P.O. BOX 628			Amount of Each Receipt this Period 500.00
City BUCKSPORT	State ME	Zip Code 04416	
FEC ID number of contributing federal political committee. C			
Name of Employer BED & BREAKFAST INN	Occupation OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1715.00		

Full Name (Last, First, Middle Initial) C. MR. JOSEPH KENNEALLY			Date of Receipt 10 / 07 / 2014 Transaction ID : SA11AI.10838
Mailing Address 16 RIVERS EDGE DR			Amount of Each Receipt this Period 250.00
City KENNEBUNK	State ME	Zip Code 04043	
FEC ID number of contributing federal political committee. C			
Name of Employer SELF-EMPLOYED	Occupation DENTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 13 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. MRS. VIRGINIA KURTZ		Date of Receipt
Mailing Address 1 WINDWARD WAY		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
CAPE ELIZABETH	ME	04107
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10698
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="2000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) B. ELLIOTT LAMONTAGNE		Date of Receipt
Mailing Address PO BOX 2753		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
KENNEBUNKPORT	ME	04046
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10820
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. MRS. MARGO MASON		Date of Receipt
Mailing Address 90 BLACK RD S		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
SEARSPORT	ME	04974
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10943
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2350.00"/>
TOTAL 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 14 OF 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. MS. DOROTHY MURRAY

Mailing Address **66 CONANT AVENUE**

City **AUBURN** State **ME** Zip Code **04210**

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 ▼ **500.00**

Date of Receipt
10 / 01 / 2014
Transaction ID : SA11AI.10715

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. MEL NEWENDYKE

Mailing Address **84 SMALL RD**

City **LITCHFIELD** State **ME** Zip Code **04350**

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 ▼ **424.00**

Date of Receipt
10 / 08 / 2014
Transaction ID : SA11AI.10866

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. MR. JOHN PELLETIER

Mailing Address **199 MAIN STREET**

City **VAN BUREN** State **ME** Zip Code **04785**

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

Name of Employer **UNIVERSITY OF MAINE FORT KENT** Occupation **ADJUNCT PROFESSOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 10 / 2014
Transaction ID : SA11AI.10898

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **450.00**

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 OF 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. CRAIG RAND

Mailing Address **PO BOX 1**

City **BREWER** State **ME** Zip Code **04412**

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

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.10954

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. JON REISMAN

Mailing Address **10 MURPHY POINT ROAD**

City **COOPER** State **ME** Zip Code **04657**

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

Name of Employer **UNIVERSITY OF MAINE AT MACHIAS** Occupation **COLLEGE PROFESSOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.10904

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. JOHN RIDGE

Mailing Address **1 ESSEX WAY**

City **SOUTH PORTLAND** State **ME** Zip Code **04106**

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 ▼ **211.00**

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.10723

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

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 OF 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. MR. JAMES ROBERTS

Mailing Address 217 PROSPECT STREET

City State Zip Code
PORTLAND ME 04103

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 ▼
345.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2014
Transaction ID : SA11AI.10890

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. PEM SCHAEFFER

Mailing Address 90 CRESTVIEW LN

City State Zip Code
BRUNSWICK ME 04011

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 ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014
Transaction ID : SA11AI.10906

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. AMY VOLK

Mailing Address 4 ELBRIDGE OLIVER WAY

City State Zip Code
SCARBOROUGH ME 04074

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

Name of Employer Occupation
MAINE STATE LEGISLATURE STATE REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
329.25

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2014
Transaction ID : SA11AI.10869

Amount of Each Receipt this Period
8.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 108.25

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 OF 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. DEREK VOLK

Mailing Address 4 ELBRIDGE OLIVER WAY

City State Zip Code
SCARBOROUGH ME 04074

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

Name of Employer Occupation
VOLK PACKAGING CORPORATION OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
591.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2014
Transaction ID : SA11AI.10859

Amount of Each Receipt this Period
8.25

Full Name (Last, First, Middle Initial)
B. MR. ERIC WARNQUIST

Mailing Address 45 RIVERSIDE DRIVE

City State Zip Code
YORK ME 03909

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 ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2014
Transaction ID : SA11AI.10728

Amount of Each Receipt this Period
190.00

Full Name (Last, First, Middle Initial)
C. WILLIAM WATKIN

Mailing Address PO BOX 483

City State Zip Code
JACKMAN ME 04945

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2014
Transaction ID : SA11AI.10705

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 398.25

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 OF 37
(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. MR. JEFFREY WEBBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 72 JAMES ST
 City BANGOR State ME Zip Code 04401
 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 Y Y
 10 / 01 / 2014
Transaction ID : SA11AI.10732
 Amount of Each Receipt this Period
 100.00

B. DANIEL WELLEHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 CURTIS RD
 City YARMOUTH State ME Zip Code 04096
 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 ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2014
Transaction ID : SA11AI.10835
 Amount of Each Receipt this Period
 500.00

C. KENNETH WOODS
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 PORTLAND PIER APT 14
 City PORTLAND State ME Zip Code 04101
 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 Y Y
 10 / 10 / 2014
Transaction ID : SA11AI.10917
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	10656.50

**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 19 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name (Last, First, Middle Initial)
A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA12.10946

Amount of Each Receipt this Period
 25000.00

Full Name (Last, First, Middle Initial)
B. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address 425 SECOND STREET NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00027466

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : SA12.10913

Amount of Each Receipt this Period
 50000.00

Full Name (Last, First, Middle Initial)
C. POLIQUIN FOR CONGRESS

Mailing Address PO BOX 50

City OAKLAND State ME Zip Code 04963

FEC ID number of contributing federal political committee. **C** C00518654

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2014
Transaction ID : SA12.10861

Amount of Each Receipt this Period
 30000.00

SUBTOTAL of Receipts This Page (optional).....▶	105000.00
TOTAL This Period (last page this line number only).....▶	105000.00

**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

Full Name (Last, First, Middle Initial)

A. ABILA

Mailing Address 10800 PECAN PARK BLVD, SUITE 400

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2014

Transaction ID : SB21B.10639

Amount of Each Disbursement this Period

62.17

Category/Type

Full Name (Last, First, Middle Initial)

B. AETNA

Mailing Address P.O. BOX 7247-0213

City PHILADELPIA State PA Zip Code 19170-0213

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10641

Amount of Each Disbursement this Period

1219.00

Category/Type

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INC. - MERCHANT SERVICES

Mailing Address 205 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2014

Transaction ID : SB21B.10642

Amount of Each Disbursement this Period

7.95

Category/Type

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

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

1289.12

**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

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INC. - MERCHANT SERVICES

Mailing Address 205 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : SB21B.10643

Amount of Each Disbursement this Period

229.30

Full Name (Last, First, Middle Initial)

B. AUGUSTA POST OFFICE

Mailing Address 126 WESTERN AVE

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
SAMPSON REIMBURSEMENT:POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10647

Amount of Each Disbursement this Period

2.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AUGUSTA POST OFFICE

Mailing Address 126 WESTERN AVE

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
SAMPSON REIMBURSEMENT:POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10648

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

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

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

229.30

**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

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address PO BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

Transaction ID : SB21B.10653

Amount of Each Disbursement this Period

15.00

B. RICHARD BENNETT

Full Name (Last, First, Middle Initial)

Mailing Address 75 BENNETT LANE

City OXFORD State ME Zip Code 04270

Purpose of Disbursement
BENNETT REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SB21B.10665

Amount of Each Disbursement this Period

2698.50

C. CITY OF AUGUSTA

Full Name (Last, First, Middle Initial)

Mailing Address 16 CONY STREET

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SB21B.10654

Amount of Each Disbursement this Period

202.50

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

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

2916.00

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. MICHELLE DALE

Mailing Address 409 CHURCH HILL ROAD

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
DALE REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	1	4

Transaction ID : SB21B.10663

Amount of Each Disbursement this Period

3	0	3	.	1	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD., SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING & DATA: GENERAL PARTY FUNDRAISING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : SB21B.10656

Amount of Each Disbursement this Period

2	3	7	.	8	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. HEADLIGHT AUDIO VISUAL INC

Mailing Address 74 EVERGREEN DRIVE

City PORTLAND State ME Zip Code 04104

Purpose of Disbursement
SAMPSON REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : SB21B.10646

Amount of Each Disbursement this Period

1	0	.	0	0
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[MEMO ITEM]

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

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

2	6	7	.	9	0	0
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2	6	7	.	9	0	0
---	---	---	---	---	---	---

**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

Full Name (Last, First, Middle Initial)

A. H FORTIER & SONS INC

Mailing Address 1220 LISBON STREET

City LEWISTON State ME Zip Code 04240

Purpose of Disbursement
TURCOTTE REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10659

Amount of Each Disbursement this Period

110.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOLIDAY INN

Mailing Address 88 SPRING STREET

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement
SAMPSON REIMBURSEMENT:TRAVEL:LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10645

Amount of Each Disbursement this Period

257.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. LOWE'S

Mailing Address 53 CROSSING WAY

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
TURCOTTE REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10660

Amount of Each Disbursement this Period

68.51

[MEMO ITEM]

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

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

0.00

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

Full Name (Last, First, Middle Initial)

A. ASHLEY SAMPSON

Mailing Address 21 BICKFORD LANE

City ROME State ME Zip Code 04963

Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : SB21B.10644

Amount of Each Disbursement this Period

837.48

Full Name (Last, First, Middle Initial)

B. ASHLEY SAMPSON

Mailing Address 21 BICKFORD LANE

City ROME State ME Zip Code 04963

Purpose of Disbursement
SAMPSON REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : SB21B.10652

Amount of Each Disbursement this Period

342.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 14 CROSSING WAY
SUITE 3

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
SAMPSON REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : SB21B.10649

Amount of Each Disbursement this Period

37.54

[MEMO ITEM]

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

837.48

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. TD BANK

Mailing Address 101 WESTERN AVE

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2014

Transaction ID : SB21B.10666

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. TD BANK

Mailing Address 101 WESTERN AVE

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : SB21B.10667

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. TD BANK

Mailing Address 101 WESTERN AVE

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2014

Transaction ID : SB21B.10668

Amount of Each Disbursement this Period

15.00

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

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

60.00

**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

Full Name (Last, First, Middle Initial)

A. THE COPY CENTER

Mailing Address 243 WESTERN AVE

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
SAMPSON REIMBURSEMENT:PRINTING EXPENSE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10651

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JOSEPH TURCOTTE

Mailing Address 137 OLD BELGRADE ROAD APT. 5

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10658

Amount of Each Disbursement this Period

1059.09

Full Name (Last, First, Middle Initial)

C. JOSEPH TURCOTTE

Mailing Address 137 OLD BELGRADE ROAD APT. 5

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement
TURCOTTE REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10662

Amount of Each Disbursement this Period

956.48

[MEMO ITEM]

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

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

1059.09

**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

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL:AIR

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	10	/	2014

Transaction ID : SB21B.10669

Amount of Each Disbursement this Period

375.20

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 100 MOUNT AUBURN AVE

City AUBURN State ME Zip Code 04210

Purpose of Disbursement
TURCOTTE REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2014

Transaction ID : SB21B.10661

Amount of Each Disbursement this Period

34.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. WHOLEFOODS

Mailing Address 2 SOMERSET STREET

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement
SAMPSON REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2014

Transaction ID : SB21B.10650

Amount of Each Disbursement this Period

128.98

[MEMO ITEM]

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

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

375.20

9445.19

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAINE REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. JOHN GROTTA COMPANY

Mailing Address 818 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
ABSENTEE BALLOT CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SB30B.10670

Amount of Each Disbursement this Period

4125.11

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

4125.11

4125.11

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) ULINE		Transaction ID : H4.10695	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2200 S. LAKESIDE DRIVE			Allocated Activity or Event Year-To-Date 332499.50	
City WAUKEGAN	State IL	Zip Code 60085	Date 10 / 01 / 2014	
Purpose of Disbursement: OFFICE EQUIPMENT PURCHASE		Category/ Type	Date 10 / 01 / 2014	
Activity or Event Identifier: Administrative			Date 10 / 01 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
305.92			1150.84	1456.76

B. Full Name (Last, First, Middle Initial) AUGUSTA POST OFFICE		Transaction ID : H4.10671	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 WESTERN AVE			Allocated Activity or Event Year-To-Date 332749.50	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 03 / 2014	
Purpose of Disbursement: POSTAGE		Category/ Type	Date 10 / 03 / 2014	
Activity or Event Identifier: Administrative			Date 10 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
52.50			197.50	250.00

C. Full Name (Last, First, Middle Initial) AUGUSTA POST OFFICE		Transaction ID : H4.10672	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 WESTERN AVE			Allocated Activity or Event Year-To-Date 337749.50	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 03 / 2014	
Purpose of Disbursement: POSTAGE		Category/ Type	Date 10 / 03 / 2014	
Activity or Event Identifier: Administrative			Date 10 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
1050.00			3950.00	5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1408.42		5298.34		6706.76

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) AUGUSTA POST OFFICE		Transaction ID : H4.10673	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 WESTERN AVE			Allocated Activity or Event Year-To-Date 337847.50	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 06 / 2014	
Purpose of Disbursement: POSTAGE		Category/ Type	Date 10 / 06 / 2014	
Activity or Event Identifier: Administrative			Date 10 / 06 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
20.58			77.42	
		=	TOTAL AMOUNT	
			98.00	

B. Full Name (Last, First, Middle Initial) CENTRAL MAINE POWER		Transaction ID : H4.10677	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 11752			Allocated Activity or Event Year-To-Date 337934.79	
City NEWARK	State NJ	Zip Code 07101-4752	Date 10 / 06 / 2014	
Purpose of Disbursement: UTILITIES		Category/ Type	Date 10 / 06 / 2014	
Activity or Event Identifier: Administrative			Date 10 / 06 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
18.33			68.96	
		=	TOTAL AMOUNT	
			87.29	

C. Full Name (Last, First, Middle Initial) CIT		Transaction ID : H4.10678	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 21146 NETWORK PLACE			Allocated Activity or Event Year-To-Date 338442.94	
City CHICAGO	State IL	Zip Code 60673-1211	Date 10 / 06 / 2014	
Purpose of Disbursement: EQUIPMENT RENTAL		Category/ Type	Date 10 / 06 / 2014	
Activity or Event Identifier: Administrative			Date 10 / 06 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
106.71			401.44	
		=	TOTAL AMOUNT	
			508.15	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.62		547.82		693.44

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.10688 FAIRPOINT COMMUNICATIONS		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 11021		Allocated Activity or Event Year-To-Date 338874.05	
City LEWISTON	State ME	Zip Code 04243-9472	Date M M / D D / Y Y Y Y 10 / 06 / 2014
Purpose of Disbursement: BROADBAND SERVICES		Category/ Type	
Activity or Event Identifier: Administrative			
FEDERAL SHARE 90.53	+ NONFEDERAL SHARE 340.58	= TOTAL AMOUNT 431.11	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.10689 GREATER AUGUSTA UTILITY DISTRICT		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12 WILLIAMS STREET		Allocated Activity or Event Year-To-Date 338971.06	
City AUGUSTA	State ME	Zip Code 04330	Date M M / D D / Y Y Y Y 10 / 06 / 2014
Purpose of Disbursement: UTILITIES		Category/ Type	
Activity or Event Identifier: Administrative			
FEDERAL SHARE 20.37	+ NONFEDERAL SHARE 76.64	= TOTAL AMOUNT 97.01	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.10691 RED CURVE SOLUTIONS		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Allocated Activity or Event Year-To-Date 340985.98	
City BEVERLY	State MA	Zip Code 01915	Date M M / D D / Y Y Y Y 10 / 06 / 2014
Purpose of Disbursement: COMPLIANCE CONSULTING		Category/ Type	
Activity or Event Identifier: Administrative			
FEDERAL SHARE 423.13	+ NONFEDERAL SHARE 1591.79	= TOTAL AMOUNT 2014.92	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
534.03		2009.01		2543.04

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) STAPLES		Transaction ID : H4.10692	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14 CROSSING WAY SUITE 3			Allocated Activity or Event Year-To-Date 341363.37	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 06 / 2014	
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type	Date	
Activity or Event Identifier: Administrative			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	
79.25			298.14	
		=	TOTAL AMOUNT	
			377.39	

B. Full Name (Last, First, Middle Initial) AUGUSTA POST OFFICE		Transaction ID : H4.10674	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 WESTERN AVE			Allocated Activity or Event Year-To-Date 341463.37	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 07 / 2014	
Purpose of Disbursement: POSTAGE		Category/ Type	Date	
Activity or Event Identifier: Administrative			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	
21.00			79.00	
		=	TOTAL AMOUNT	
			100.00	

C. Full Name (Last, First, Middle Initial) AUGUSTA POST OFFICE		Transaction ID : H4.10675	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 WESTERN AVE			Allocated Activity or Event Year-To-Date 341683.37	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 07 / 2014	
Purpose of Disbursement: POSTAGE		Category/ Type	Date	
Activity or Event Identifier: Administrative			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	
46.20			173.80	
		=	TOTAL AMOUNT	
			220.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.45		550.94		697.39

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.10679 EPAY BUSINESS SOLUTIONS INC.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 27A MIDSTATE DRIVE		Allocated Activity or Event Year-To-Date 343411.95	
City AUBURN	State MA	Zip Code 01501	Date 10 / 09 / 2014
Purpose of Disbursement: PAYROLL SERVICES/TAX		Category/ Type	Date
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
363.00		1365.58	1728.58

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.10680 JOSEPH TURCOTTE		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 137 OLD BELGRADE ROAD APT. 5		Allocated Activity or Event Year-To-Date 344416.59	
City AUGUSTA	State ME	Zip Code 04330	Date 10 / 09 / 2014
Purpose of Disbursement: NON-FEA PAYROLL		Category/ Type	Date
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
210.97		793.67	1004.64

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.10681 CAMERIN SEIGARS		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 ORCHARD STREET		Allocated Activity or Event Year-To-Date 344485.85	
City GARDINER	State ME	Zip Code 04345	Date 10 / 09 / 2014
Purpose of Disbursement: NON-FEA PAYROLL		Category/ Type	Date
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
14.54		54.72	69.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
588.51		2213.97		2802.48

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Form A: Full Name (Last, First, Middle Initial) JASON SAVAGE, Transaction ID : H4.10682, Allocated Activity or Event: Administrative, Date: 10/09/2014, Total Amount: 2116.45

Form B: Full Name (Last, First, Middle Initial) Rep. DEBORAH SANDERSON, Transaction ID : H4.10683, Allocated Activity or Event: Administrative, Date: 10/09/2014, Total Amount: 1000.00

Form C: Full Name (Last, First, Middle Initial) ASHLEY SAMPSON, Transaction ID : H4.10684, Allocated Activity or Event: Administrative, Date: 10/09/2014, Total Amount: 1141.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 894.21, 3363.94, 4258.15

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Form A: MICHELLE DALE, Transaction ID: H4.10685. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (NON-FEA PAYROLL), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/09/2014), and Amounts (Federal Share: 193.08, NonFederal Share: 726.35, Total Amount: 919.43).

Form B: AUGUSTA POST OFFICE, Transaction ID: H4.10676. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (POSTAGE), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/10/2014), and Amounts (Federal Share: 105.00, NonFederal Share: 395.00, Total Amount: 500.00).

Form C: EXPEDIA, Transaction ID: H4.10687. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (TRAVEL:CAR RENTAL), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/10/2014), and Amounts (Federal Share: 198.94, NonFederal Share: 748.40, Total Amount: 947.34).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (497.02) + NONFEDERAL SHARE (1869.75) = TOTAL AMOUNT (2366.77)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAINE REPUBLICAN PARTY

Form A: STAPLES, Transaction ID: H4.10693. Allocated Activity or Event: Administrative. Date: 10/10/2014. Total Amount: 198.23.

Form B: USPS, Transaction ID: H4.10696. Allocated Activity or Event: Administrative. Date: 10/10/2014. Total Amount: 1500.00.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (356.63), NONFEDERAL SHARE (1341.60), TOTAL AMOUNT (1698.23).

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

Table with 3 columns: FEDERAL SHARE (4570.89), NONFEDERAL SHARE (17195.37), TOTAL AMOUNT (21766.26).