

DEBT SETTLEMENT PLAN

RECEIVED
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PUBLIC RECORDS

13 FEB -4 PM 12:41

NAME OF COMMITTEE Dill for US Senate		FEC I.D. NUMBER C00511261
ADDRESS 1227 Shore Road Cape		
CITY, STATE AND ZIP CODE Cape Elizabeth, ME 04107		

PART I - COMMITTEE SUMMARY INFORMATION

1. CASH ON HAND AS OF <u>1/28/13</u>	\$0	6. TOTAL AMOUNT OF DEBTS OWED BY THE COMMITTEE	\$5,490.82
2. TOTAL ASSETS TO BE LIQUIDATED	\$0	7. TOTAL NUMBER OF CREDITORS OWED	1
3. TOTAL (ADD 1 AND 2)	\$0	8. NUMBER OF CREDITORS IN PART II OF THIS PLAN	1
4. YEAR TO DATE RECEIPTS	\$70,981.37	9. TOTAL AMOUNT OF DEBTS OWED TO THE CREDITORS IN PART II OF THIS PLAN	\$0
5. YEAR TO DATE DISBURSEMENTS	\$169,933.84	10. TOTAL AMOUNT TO BE PAID TO CREDITORS IN PART II OF THIS PLAN	\$0

11. IS THE COMMITTEE TERMINATING ITS ACTIVITIES?

YES NO IF YES, WHEN DOES THE COMMITTEE EXPECT TO FILE A TERMINATION REPORT? IF NO, COMMITTEE IS NOT ELIGIBLE TO FILE A DEBT SETTLEMENT PLAN (SEE INSTRUCTIONS).

Termination report sent in with Debt Settlement Plan (1/28/13)

12. IF THIS IS AN AUTHORIZED COMMITTEE, DOES THE CANDIDATE HAVE OTHER AUTHORIZED COMMITTEES?

YES NO IF YES, LIST BELOW.

13. DOES THE COMMITTEE HAVE SUFFICIENT FUNDS TO PAY THE TOTAL AMOUNT INDICATED IN THIS PLAN?

YES NO IF NO, WHAT STEPS WILL BE TAKEN TO OBTAIN THE FUNDS?

14. HAS THE COMMITTEE FILED PREVIOUS DEBT SETTLEMENT PLANS?

YES NO

15. AFTER DISPOSING OF ALL THE COMMITTEE'S DEBTS AND OBLIGATIONS, WILL THERE BE ANY RESIDUAL FUNDS?

YES NO IF YES, HOW WILL THE FUNDS BE DISBURSED?

I certify, to the best of my knowledge, that the information contained in this Debt Settlement Plan is true, correct and complete.

SIGNATURE OF TREASURER OF COMMITTEE: *Janet N. CTR*

DATE: 1/29/13

FEC FORM 8
(Revised 1/2001)

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DEBT SETTLEMENT PLAN

PART II

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CREDITOR SUMMARY INFORMATION (FILL OUT FOR EACH CREDITOR IN PLAN)

FULL NAME AND MAILING ADDRESS OF CREDITOR	DATE INCURRED	AMOUNT OWED TO CREDITOR	AMOUNT OFFERED IN SETTLEMENT
Cynthia A. Dill 1227 Shore Road Cape Elizabeth, ME 04107	9-18-12 to 10-11-12	\$5,490.82	\$ 0

TYPE OF CREDITOR:

- INCORPORATED COMMERCIAL VENDOR UNINCORPORATED COMMERCIAL VENDOR CANDIDATE COMMITTEE EMPLOYEE OTHER INDIVIDUAL

A. TERMS OF THE INITIAL EXTENSION OF CREDIT AND NATURE OF THE DEBT

The debt was an advance for travel costs and lawn signs. The candidate, Cynthia Dill, is forgiving the debt in full.

B. EFFORTS MADE BY THE COMMITTEE TO PAY THE DEBT

Fundraising email sent to constituents

C. STEPS TAKEN BY THE CREDITOR TO COLLECT THE DEBT

None.

CREDITOR SECTION (TO BE FILLED OUT BY CREDITOR)

D. WAS THE EFFORT MADE BY THE CREDITOR TO COLLECT THE DEBT SIMILAR TO OTHER DEBT COLLECTION EFFORTS AGAINST NONPOLITICAL DEBTORS?

- YES NO IF NO, PLEASE EXPLAIN
debt to candidate

E. ARE THE TERMS OF THE DEBT SETTLEMENT COMPARABLE TO OTHER SETTLEMENTS MADE BY THE CREDITOR WITH OTHER NONPOLITICAL DEBTORS?

- YES NO IF NO, PLEASE EXPLAIN
debt to candidate

As a representative of the creditor, I hereby accept the settlement offer made to me by the committee and upon payment agree to consider the debt satisfied (or attach a copy of the signed settlement).

SIGNATURE OF
CREDITOR OR
REPRESENTATIVE

Cynthia A. Dill

DATE

DEBT SETTLEMENT PLAN

PART III

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LIST REMAINING DEBTS

A. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR n/a	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL		
IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO		

B. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR n/a	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL		
IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO		

C. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR n/a	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL		
IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO		

D. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR n/a	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL		
IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO		

E. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR n/a	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL		
IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO		

DOES THE COMMITTEE HAVE SUFFICIENT FUNDS TO PAY THE REMAINING AMOUNTS TO BE PAID OR OFFERED?

YES
 NO
 IF NO, WHAT STEPS WILL BE TAKEN TO OBTAIN THE FUNDS?

no amounts remaining

1502608285



Express

52 29

NO POUCH NEEDED. See back for peel and stick application instructions.

FedEx US Airbill Express 8530 5393 4035

1 From This portion can be removed for Recipient's records. Date 1/30/15 FedEx Tracking Number 853053934035

Sender's Name Cynthia A Dill Phone 207 767-7197

Company LAW OFFICE OF CYNTHIA DILL

Address 1827 SHORE RD

City CAPE ELIZABETH State ME ZIP 04107-2113

2 Your Internal Billing Reference 3 To Recipient's Name Public Records Phone 207 894-0528

Company Public Records

Recipient's Address 98711104 SHORE C. O. BATHMEADOW

Address City State ZIP



0312169280



4a Express Package Service FedEx Priority Overnight

4b Express Freight Service FedEx 1Day Freight

5 Packaging FedEx Envelope

6 Special Handling SATURDAY Delivery

7 Payment Bill to Recipient

8 Sign to Authorize Delivery Without a Signature

Additional shipping options and terms, including 'By signing you authorize us to deliver this shipment without obtaining a signature...' and 'Your liability is limited to \$100 unless you declare a higher value...'.

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

01.30.13

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

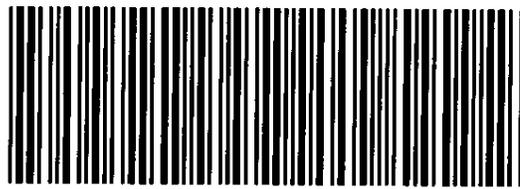
PREPARER

RD

DATE PREPARED

02.04.13

15025082852



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