

Rec'd 10/26/18



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES
 Mail: 135 State House Station, Augusta, Maine 04333
 Office: 45 Memorial Circle, Augusta, Maine

Website: www.maine.gov/ethics
 Phone: 207-287-4179
 Fax: 207-287-6775

24-HOUR REPORT OF CONTRIBUTIONS AND EXPENDITURES

For Political Action Committees, Ballot Question Committees and Political Party Committees

COMMITTEE INFORMATION		
Name of Committee: South Portland Citizens for Property Rights		Phone: 207-232-7667
Mailing Address (City, State, Zip Code): 6 Willard St. South Portland, ME 04106		
TREASURER INFORMATION		
Name of Treasurer: Maggie Birlem		Phone: 207-400-7499
Mailing Address (City, State, Zip Code): 506 Preble St. South Portland, ME 04106		
FILING SCHEDULE FOR 2018		
Election	Election Date	Reporting Period
Primary Election	June 12, 2018	May 30 — June 11, 2018
General Election	November 6, 2018	October 24 — November 5, 2018
WHEN TO FILE	WHAT CONTRIBUTIONS SHOULD BE REPORTED	WHAT EXPENDITURES SHOULD BE REPORTED
Within 24 hours, including Saturdays and Sundays, of receiving the contribution or making the expenditure, incurring the obligation, or placing the order. Reports can be filed via the committee's electronic filing website.	Any <u>single</u> contribution of \$5,000 or more received during the reporting period.	Any <u>single</u> expenditure of \$1,000 or more made during the reporting period. Orders placed with or obligations made to vendors for goods or services are considered expenditures at the time the orders or obligations are made. Overhead costs, such as rent, taxes, utilities and some salary payments are not required to be reported.
IMPORTANT REMINDERS		
The information contained in this report must also be included on the appropriate schedule of the next regularly scheduled campaign finance report.		
If an expenditure is disclosed in an independent expenditure report, it is not necessary to file a separate 24-hour report for the same expenditure.		

CONTRIBUTIONS OF \$5,000 OR MORE

Contributor Name:		Date of Contribution:
Address:		Amount of Contribution: \$
City, State, Zip Code:		
Occupation:	Employer:	

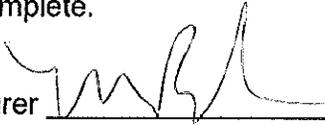
Contributor Name:		Date of Contribution:
Address:		Amount of Contribution: \$
City, State, Zip Code :		
Occupation:	Employer:	

EXPENDITURES OF \$1,000 OR MORE

Payee/Creditor: <i>Sentry Newspaper</i>		Date of Expenditure: <i>10/23/18</i>
Address: <i>6 Digital Drive</i>		Amount of Expenditure: <i>\$ 1370.75</i>
City, State, Zip Code: <i>Biddeford, ME 04005</i>		
Purpose of Expenditure: <i>Newspaper Ad</i>		
Expenditure made on behalf of (name of candidate or ballot question): <i>STR Ordinance</i>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose

Payee/Creditor: <i>Minuteman Press</i>		Date of Expenditure: <i>10/26/18</i>
Address: <i>875 Broadway</i>		Amount of Expenditure: <i>\$ 1265.62</i>
City, State, Zip Code: <i>South Portland, ME 04106</i>		
Purpose of Expenditure: <i>Door hangers</i>		
Expenditure made on behalf of (name of candidate or ballot question): <i>STR Ordinance</i>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose

I, Margaret Birkley, certify that the information in this report is true, correct and complete.

Signature of Treasurer 

Date 10/26/18

CONTRIBUTIONS OF \$5,000 OR MORE

Contributor Name:		Date of Contribution:
Address:		Amount of Contribution: \$
City, State, Zip Code:		
Occupation:	Employer:	

Contributor Name:		Date of Contribution:
Address:		Amount of Contribution: \$
City, State, Zip Code :		
Occupation:	Employer:	

EXPENDITURES OF \$1,000 OR MORE

Payee/Creditor: <i>Just Yard Signs</i>		Date of Expenditure: <i>10/19/18</i>
Address: <i>4880 AI Distribution Court</i>		Amount of Expenditure: \$ <i>1296.25</i>
City, State, Zip Code: <i>Orlando, FL 32822</i>		
Purpose of Expenditure: <i>Yard Signs</i>		
Expenditure made on behalf of (name of candidate or ballot question): <i>STR ordinance</i>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose

Payee/Creditor:		Date of Expenditure:
Address:		Amount of Expenditure: \$
City, State, Zip Code:		
Purpose of Expenditure:		
Expenditure made on behalf of (name of candidate or ballot question):		<input type="checkbox"/> Support <input type="checkbox"/> Oppose

I, *Margaret Birlen*, certify that the information in this report is true, correct and complete.

Signature of Treasurer *[Signature]*

Date *10/26/18*