

SUSAN MOONEY, CITY CLERK
 CITY OF SOUTH PORTLAND
 25 COTTAGE ROAD, SOUTH PORTLAND, ME 04106
 OFFICE HOURS: M-W & F 8:00-4:30, TH 8:00-6:30

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2013 CAMPAIGN FINANCE REPORT

For Ballot Question Committees in Municipal Elections

Please complete ALL entries.

NAME OF COMMITTEE		Natural Resources Council of Maine		<input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT
STREET		3 Wade Street		
CITY AND ZIP CODE	Augusta ME 04330	TELEPHONE NUMBER	207-622-3101	
E-MAIL		kthompson@nrcm.org		
NAME OF TREASURER		Kathryn Thompson		<input type="checkbox"/> CHECK IF CHANGED FROM PREVIOUS REPORT
MAILING ADDRESS STREET		3 Wade Street		
CITY AND ZIP CODE	Augusta ME	TELEPHONE NUMBER	207-430-0119	
E-MAIL		k-thompson@nrcm.org		

Type of Report	Due Date	Dates of Report Period
<input type="checkbox"/> Initial	Date of Registration	Beginning of Campaign — Date of Registration
<input type="checkbox"/> April Quarterly	April 10, 2013	January 1—March 31, 2013
<input type="checkbox"/> July Quarterly	July 15, 2013	April 1, 2013—June 30, 2013
<input type="checkbox"/> October Quarterly	October 7, 2013	July 1, 2013—September 30, 2013
<input checked="" type="checkbox"/> 11-Day Pre-General	October 25, 2013	October 1, 2013—October 22, 2013
<input type="checkbox"/> 42-Day Pre-General	December 17, 2013	October 23, 2013—December 10, 2013
<input type="checkbox"/> January Quarterly	January 15, 2014	December 11, 2013—December 31, 2013
<input type="checkbox"/> Amendment to: _____		
<input type="checkbox"/> No Activity Report: Use only if the committee had no contributions and no expenditures and did not incur any unpaid debts or obligations during the reporting period. Check the appropriate report above as well.		
<input type="checkbox"/> Termination Report: If the committee will have no further activity. Check the appropriate report above as well.		

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE, CORRECT, AND COMPLETE.

Kathryn Thompson
 Treasurer's Signature

10/23/13
 Date

**SCHEDULE A
CASH CONTRIBUTIONS**

- For contributors who gave more than \$100, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For cash contributions totaling \$100 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$100 in a report period, you must list that contributor separately.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
	Natural Resources Council of Maine 3 Wade St. Augusta ME	General Treasury Transfer		2.00
	"	General Treasury Transfer		9500
Total cash contributions (this page only) ⇒ <i>(combined totals from all Schedule A pages must be listed on Schedule F)</i>				9700.00

Key Codes:

- | | |
|---------------------------------|---|
| 1 = Individuals | 4 = Party Committee |
| 2 = Commercial Source | 5 = Candidate Committees |
| 3 = Political Action Committees | 6 = Unitemized Contributions of \$100 or less |

Duplicate as needed.

05/13

BQC Name _____

Page 3 of _____
Schedule A Only

**SCHEDULE A (continued)
CASH CONTRIBUTIONS**

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
Total cash contributions (this page only) => <i>(combined totals from all Schedule A pages must be listed on Schedule F)</i>				

Key Codes:

1 = Individuals

2 = Commercial Source

3 = Political Action Committees

4 = Party Committee

5 = Candidate Committees

6 = Unitemized Contributions of \$100 or less

Duplicate as needed.

**SCHEDULE A-1
IN-KIND CONTRIBUTIONS**

- In-kind contributions are goods and services (including facilities) that a committee received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the committee by others if the committee does not expect to reimburse the person who made the purchase.
- For contributors who gave more than \$100 in value, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For contributions totaling \$100 in value or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$100 in a report period, you must list that contributor separately.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	DESCRIPTION (of goods, services, facilities, or discounts received)	TYPE (use key code)	VALUE (estimated fair market value)
10/12/13	Natural Resources Council of Maine 3 Wade Street Augusta		Staff time/benefits 1825 hours		3411.80
10/9/13	"	"	Travel reimbursement		518.63

Total in-kind contributions (this page only) ⇒
(combined totals from all Schedule A-1 pages must be listed on Schedule F) **3930.43**

Key Codes:

- | | |
|---------------------------------|---|
| 1 = Individuals | 4 = Party Committee |
| 2 = Commercial Source | 5 = Candidate Committees |
| 3 = Political Action Committees | 6 = Unitemized Contributions of \$100 or less |

Duplicate as needed.

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BQC Name _____

Page 5 of _____
Schedule B Only

**SCHEDULE B
EXPENDITURES TO SUPPORT OR OPPOSE**

- Enter all expenditures, including cash contributions from this committee, made to support or oppose a candidate, political action committee, ballot question committee, or party committee.
- Enter all expenditures made to support or oppose a ballot question, referendum, or citizen initiative, including those in signature-gathering phase.
- Enter the name of the candidate, ballot question, or committee supported or opposed by the expenditure and indicate whether the expenditure was made in support or opposition.

If a single expenditure is made to support or oppose multiple candidates, committees, or ballot questions, the expenditure must be itemized by the amount spent per candidate, committee, or question, not as a single expenditure, and each candidate, committee, or ballot question must be identified.

EXPENDITURE TYPES			
CON	Contribution to candidate, party or committee	POL	Polling and survey research
CNS	Campaign consultants	POS	Postage for U.S. Mail and mail box fees
EQP	Equipment (office machines, furniture, cell phones)	PRO	Professional services
FND	Fundraising events	PRT	Print media ads only (newspapers, magazines, etc.)
FOD	Food for campaign events, volunteers ~	RAD	Radio ads, production costs
LIT	Printing and graphics (flyers, signs, palmcards, t-shirts, etc.)	SAL	Campaign workers' salaries and personnel costs
MHS	Mail house (all services purchased)	TRV	Travel (fuel, mileage, lodging, etc.)
OFF	Office rent, utilities, phone and internet services, supplies	TVN	TV or cable ads, production costs
OTH	Other	WEB	Website design, registration, hosting, maintenance, etc.)
PHO	Phone banks, automated telephone calls		

Only these expenditure types require a remark: CNS, OTH, PRO and SAL.

DATE	PAYEE'S NAME AND ADDRESS	REMARKS	TYPE	AMOUNT
10/16/13	Protect South Portland P.O. BOX 2154 South Portland ME 04106		CON	9500
	Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/>			
10/3/13	Marty Braun 265 Pleasant Ave. Peaks Island ME 04107	design	CNS	200
	Payment to support <input checked="" type="checkbox"/> or to oppose <input type="checkbox"/>			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/>			

Total expenditures this page only =>
(combined totals from all Schedule B pages must be listed on Schedule F)

97000

**SCHEDULE B (continued)
EXPENDITURES TO SUPPORT OR OPPOSE**

DATE	PAYEE'S NAME AND ADDRESS	REMARKS	TYPE	AMOUNT
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
	Payment to support <input type="checkbox"/> or to oppose <input type="checkbox"/> :			
Total expenditures this page only =>				
(combined totals from all Schedule B pages must be listed on Schedule F)				

Duplicate as needed.

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BQC Name _____

Page 7 of _____
Schedule C Only

SCHEDULE C LOANS AND REPAYMENTS

List all new and continuing loans that were unpaid at any time during this reporting period. If a loan amount is forgiven, the amount forgiven **must** also be entered as a contribution on Schedule A.

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
LENDER'S NAME AND ADDRESS	LOAN BALANCE AT BEGINNING OF PERIOD	ACTIVITY THIS PERIOD (report amount and date)			LOAN BALANCE AT END OF PERIOD (1+2) - 3 - 4
		AMOUNT LOANED THIS PERIOD	AMOUNT REPAYD THIS PERIOD	AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also)	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
Totals for each column ⇒		Enter on Schedule F, Line 3	Enter on Schedule F, Line 7	Enter on Schedule F, Line 3a	Enter on Schedule F, Line 14

Duplicate as needed.

**SCHEDULE D
UNPAID DEBTS AND OBLIGATIONS**

- A debt or obligation is incurred if a committee places an order for a good or service without making a payment; makes a promise or agreement to pay for a good or service; signs a contract for a good or service; or receives delivery of a good or service for which the committee has not paid.
- This schedule is a list of all debts and obligations of the committee as of the end of this reporting period. When the obligation has been paid, the expenditure (i.e., the actual payment) must be reported on Schedule B.
- If the committee has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- **If obligations from a previous campaign finance report still remain unpaid, you will need to continue to report them on this schedule until they have been paid in full.**

DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT
10/1/13	Carol Kelley	Communication Consulting	4000.00
Total unpaid debts and obligations (this page only) ⇒ <i>(combined totals from all Schedule D pages must be listed on Schedule F)</i>			4000.00

Duplicate as needed.

05/13

BQC Name Natural Resources Council of Maine

**SCHEDULE F
SUMMARY SCHEDULE
CASH ACTIVITY**

Receipts	Total for This Period	Year-to-Date Total
1. Cash Contributions (Schedule A)	9700.00	9700.00
2. Other Cash Receipts (interest, etc.)	-	-
3. Loans (Schedule C, column 2)	-	-
3a. Adjustment for Forgiven Loan Amount (Sch. C, column 4)	-	-
4. Total Receipts (lines 1 + 2 + 3 - 3a)	9700.00	9700.00
Expenditures	Total for This Period	Year-to-Date Total
5. Expenditures to Support or Oppose (Schedule B)	9700.00	9700.00
6. Loan Repayment (Schedule C, column 3)	0	-
7. Total Payments (lines 5 + 6)	9700.00	9700.00

CASH SUMMARY

	Total for This Period	Year-to-Date Total
8. Cash Balance at Beginning of Period	0	0
9. Plus Total Receipts This Period (line 4 above)	9700.00	9700.00
10. Minus Total Payments This Period (line 7 above)	9700.00	9700.00
11. Cash Balance at End of Period	0	0

OTHER ACTIVITY

	Total for This Period	Year-to-Date Total
12. In-Kind Contributions (Schedule A-1)	3930.43	18856.75
13. Total Loan Balance at End of Period (Sch. C, column 5)	0	0
14. Total Unpaid Debts at End of Period (Schedule D)	4000.00	4000.00

From: NRCM

207 622 4343

10/23/2013 11:20

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