



Email: sdallaire@auburnmaine.gov Phone: (207) 333-6600

Fax: (207)333-6623

OCT 8 0 2023

2023 Campaign Finance Report

For Municipal Candidates

Name of Candidate:	LER	OY G. WA	LKER	☐ Check if any information has
Street Address:	41 BA	ROAD ST		changed from previous report
City and ZIP:	AUB	URN 042	Phone Number: 207-577	-2694
Email:	LWAL	KER@ AUBUR	NMAINE & GOV	
Office Sought:	1	5 COUNCILOR	District Number (if applicable)	5
Name of Treasurer:		HEN MAR	TELLI	Check if any information has
Mailing Address:	2160	OOK ST #	6	changed from previous report
City and ZIP:	AUBU	RN 0421	Phone Number: 207-440-7	1883
Email:	SIMA	FRTELLT 218	6@GMRIL.COM	
TYPE OF REPO	PRT	· DUE DATE	DATES OF REPORTING	PERIOD
11-Day Pre-June	Election	June 2, 2023	Beginning of campaign - N	May 30, 2023
☐ 42-Day Post-June		July 25, 2023	May 31 – July 18,	2023
☐ July Semiannual		July 17, 2023	January 1 – June 30	
11-Day Pre-Nover	mber Election	October 27, 2023	If filing first report: Beginning of ca	ımpaign – October 24
			Or If 2023 July Semiannual filed: Ju	ılv 1 – October 24
☐ 42-Day Post-Nove	ambar Election	December 19, 2023	October 25 – Decembe	
☐ January Semiann		January 16, 2024	July 1 – December 3	
☐ Amendment to:	iuul	,, <u>,</u> , <u>,</u>		
☐ Other (specify):				
		e at		
☐ Check if campaigr	n had no activity	tor the reporting period (n	o other pages are required).	

I CERTIFY THAT I HAVE EXAMIS TRUE, CORRECT, AND COM		ND TO THE BEST O	OF MY KNOWLEDGE IT
Treasurer Signature	10/25/2 6 2-3 Date Can	Juy Gladidate Signature	Chy R Date

Page of Schedule A only

SCHEDULE A CASH CONTRIBUTIONS

OCT 8 0 2023

- Itemize all cash contributions from contributors who have given you more than \$50 in this report period.
- Both cash and in-kind contributions count toward the \$50 threshold.
- Report the occupation and employer for individual contributors who contributed more than \$50 in this report period. If you
 requested employment information but did not receive it, write "information requested."
- Cash contributions of \$50 or less may be aggregated and reported as a lump sum. Use "Contributors giving \$50 or less" as the
 contributor type.
- If you transferred surplus funds from a previous campaign to your current campaign, report that amount in the first report for the current election cycle.
- Duplicate as needed.

Total contributions from the same source (except candidate and candidate's spouse/domestic partner) may NOT exceed \$575 in any election for municipal office.

		Contributor Types		
_	O III I and Condidate's Secure / Domestic Partner		5	Political Party Committees
1	Candidate and Candidate's Spouse/Domestic Partner	,	6	Other Candidates and Committees
2	Other Individuals	•	_	
3	Commercial Source	7	7	Contributors giving \$50 or less
J			8	Transfer from previous campaign
4	Political Action Committees	•	0	Transier nom previous compagn

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Туре	Amount
10/25/2023	CURECANNABISCOLU 32 RIVERSIDE DR,	RETAIL		3	\$50000
	AUBUKIO, ME 09210				
0/25/2013	LEROY G WALKER	RETIRED		1	2829
					d- 29

Total Cash Contributions (this page only)

(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)

\$508 29

Page 2 of 2 Schedule A only

SCHEDULE A CASH CONTRIBUTIONS

OCT 80 2023

Co	ntri	buto	r Ty	pes
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- 1 Candidate and Candidate's Spouse/Domestic Partner
- 2 Other Individuals
- 3 Commercial Source
- 4 Political Action Committees

- 5 Political Party Committees
- 6 Other Candidates and Committees
- 7 Contributors giving \$50 or less
- 8 Transfer from previous campaign

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Туре	Amount

Total Cash Contributions (this page only)→

(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)



Page ____of ____ Schedule A-1 only

SCHEDULE A-1 IN-KIND CONTRIBUTIONS

OCT 8 0 2023

In-kind contributions are goods and services (including use of facilities) that you received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the campaign by the candidate or supporters if the campaign does not expect to reimburse the candidate or supporter. These contributions may come from the candidate, candidate's family, supporters, PACs, party committees, or other entities. Goods that you have retained from an earlier election such as signs are not in-kind contributions to your current campaign.

- Itemize all in-kind contributions from contributors who have given you contributions totaling more than \$50 in this report period. Both cash and in-kind contributions count toward the \$50 threshold.
- Report the occupation and employer for individual contributors who contributed more than \$50 in this report period. If you
 requested employment information but did not receive it, write "information requested."
- In-kind contributions of \$50 or less may be aggregated and reported as a lump sum. Use "Contributors giving \$50 or less" as the contributor type.
- If you received goods or services for less than the usual and customary charge, report the amount of the discount as an in-kind contribution.
- A description of the goods or services received is required.
- Duplicate as needed.

Total contributions (cash and in-kind) from the same source (except candidate and candidate's spouse/domestic partner) may NOT exceed \$575 in any election for municipal office.

		Contributor Types				
1 Candidate	and Candidate's Spouse/Domestic Partner		5	Political Party Commi	ttees	
2 Other Indiv	viduals		6	Other Candidates and	d Committees	
3 Commercia	al Source		7	Contributors giving \$5	50 or less	
4 Political Ac	ction Committees		8	Transfer from previou	is campaign	
Date Received:	Contributor's Name, Address, Zip:	Occupation:		Employer:	Type:	Amount:
Description of Go	oods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:		Employer:	Туре:	Amount:
Description of Go	oods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:		Employer:	Туре:	Amount:
Description of Go	oods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:		Employer:	Туре:	Amount:
Description of Go	oods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:		Employer:	Type:	Amount:
Description of Go	l pods/Services:					
Description of Go		Total In-Kind		ntributions (this pag		

Page ____of ___ Schedule A-1 only

SCHEDULE A-1 IN-KIND CONTRIBUTIONS

OCT 3 0 2023

		IN-KIND CONTRIBUTIONS		UU 3 1	7 2023
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Go	ods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Туре:	Amount:
Description of Go	oods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Туре:	Amount:
Description of Go	oods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Go	oods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Туре:	Amount:
Description of Go	oods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Туре:	Amount:
Description of Go	oods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Go	oods/Services:				
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Go	oods/Services:	· ·			
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Go	oods/Services:			·	
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Туре:	Amount:
Description of Go	oods/Services:				

Total In-Kind Contributions (this page only)

(combined totals from all Schedule A-1 pages must be listed on Schedule F, Line 8)

Page of 2 Schedule B only

Other and fees (bank, contribution, and money order fees, etc.)

SCHEDULE B EXPENDITURES

OCT 20 2023

- Enter the date, payee, expenditure type, and amount for each expenditure made during the report period.
- All expenditures require a remark. Enter a description of the goods and services purchased.
- For expenditures made with the candidate's or authorized individual's personal funds and that are reimbursed within the same report period, enter them as reimbursed expenditures (Payee Name is the vendor and the person who was reimbursed is named in the Remark field). If expenditures made by others are not reimbursed by the end of the report period, they are either reported as in-kind contributions or unpaid debts and obligations.
- If you use campaign funds to pay or reimburse an immediate family member or household member for goods or services they
 provided or purchased for the campaign, you <u>must</u> list the family or household relationship in the remarks section.

EXPENDITURE TYPES

ОТН

Duplicate as needed

APP

Apparel (t-shirts, hats, embroidery, etc.)

Only enter expenditures that have actually been paid. Enter unpaid debts and obligations on Schedule D.

CON Co	ontribution to party committee, non-profit, other	nel and campaign staff, consulting,	and independent contractors		
	juipment of \$50 or more (computer, tablet, phone, furniture, etc.)	(phone banking, robocalls, and tex	ts)		
	ampaign and fundraising events (venue/booth rental, entertainment, pplies, etc.)	POL	Polling a	and survey research	
	od for campaign events or volunteers, catering	POS	Postage	for US Mail and mailbox fees	
HRD Ha	ardware and small tools (hammer, nails, lumber, paint, etc.)	PRO	Professi	ional services (graphic design, lega	I services, web design)
LIT Pri	inted campaign materials (palmcards, signs, stickers, flyers etc.)	RAD	Radio ad	ds and production costs only	
MHS Ma	ail house and direct mail (design, printing, mailing, and postage)	TKT	Entrance	e cost to event (bean suppers, fairs	, party events, etc.)
NEW Ne	ewspaper and print media ads only	TRV	Travel (r	mileage and lodging, etc.)	
OFF Off	fice supplies, rent, utilities, internet service, phone minutes/data	TVN	TV/Cabl	le ads, production, and media buye	r costs only
ONL Soc	ocial medial and online advertising only	WEB	Website	and internet costs (website domain	n and registration, etc.)
Date	Name of Payee	Туре		Remark	Amount
		Total E	(pendit	ures (this page only) →	\$528.29

SCHEDULE B EXPENDITURES

	EXPENDI	IUKE I	TPES
APP	Apparel (t-shirts, hats, embroidery, etc.)	ОТН	Other and fees (bank, contribution, and money order fees, etc.)
CON	Contribution to party committee, non-profit, other	PER	Personnel and campaign staff, consulting, and independent contractors
EQP	Equipment of \$50 or more (computer, tablet, phone, furniture, etc.)	PHO	Phones (phone banking, robocalls, and texts)
EVT	Campaign and fundraising events (venue/booth rental, entertainment, supplies, etc.)	POL	Polling and survey research
FOD	Food for campaign events or volunteers, catering	POS	Postage for US Mail and mailbox fees
HRD	Hardware and small tools (hammer, nails, lumber, paint, etc.)	PRO	Professional services (graphic design, legal services, web design)
LIT	Printed campaign materials (palmcards, signs, stickers, flyers etc.)	RAD	Radio ads and production costs only
MHS	Mail house and direct mail (design, printing, mailing, and postage)	ткт	Entrance cost to event (bean suppers, fairs, party events, etc.)
NEW	Newspaper and print media ads only	TRV	Travel (mileage and lodging, etc.)
OFF	Office supplies, rent, utilities, internet service, phone minutes/data	TVN	TV/Cable ads, production, and media buyer costs only
ONL	Social medial and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Туре	Remark	Amount
		Total Expendi	tures (this page only) 👈	0

Page ___of __ Schedule C only

SCHEDULE C LOANS AND LOANS REPAYMENT

- 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.
- Loans cannot exceed \$575 in any election for municipal candidates, except loans made by the candidate, the candidate's spouse or domestic partner, or a financial institution in the State of Maine
- Duplicate as needed.

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
	Loan Balance at Beginning of Period	ACTIVITY THIS PERIOD (report amount and date)			LOAN BALANCE AT
Lender's Name and Address		Amount Loaned this Period	Amount Repaid this Period	Amount Forgiven this Period	END OF PERIOD (1+2) – 3 – 4
		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:	
		Enter on Schedule F, Line 2	Enter on Schedule F, Line 6	Enter on Schedule F, Line 2.a	Enter on Schedule F, Line 10
Totals for each column →	0	0	0	0	0

Candidate Name:	LEROY	G, WALKER	
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Page ___of __ Schedule D only

SCHEDULE D UNPAID DEBTS and OBLIGATIONS

- You have incurred a debt or obligation if you have placed an order for a good or service without making a payment; made a
 promise or agreement to pay for a good or service; signed a contract for a good or service; and received delivery of a good
 or service for which you have not paid.
- If the campaign 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.
- Report actual payments to vendors on Schedule B.
- Duplicate as needed.

	and the second s		
Date	Creditor's Name and Address	Purpose	Amount
Total Unpaid Debts and Obligations (this page only)			0

Date: 10/25/23

SCHEDULE F SUMMARY SCHEDULE

- This page is required for all candidates except those checking the no activity box on the cover page of the report.
- The cash balance on line 14 must match the campaign's reconciled bank account balance as of the last day of the report period.

CASH ACTIVITY				
Receipts				
1.	Cash Contributions this Period (total of all Schedule A pages)	\$52829		
2.	Loans this Period (Schedule C, column 2)	0		
2.a.	Adjustment for Forgiven Loan Amount this Period (Schedule C, column 4)*	- 0		
3.	Other Cash Receipts this Period (interest, etc.)	0		
4.	Total Receipts this Period [(lines 1 + 2 + 3) – line 2.a.]	\$52829		
Expenditures				
5.	Expenditures this Period (total of all Schedule B pages)	\$52829		
6.	Loan Repayments this Period (Schedule C, column 3)	0		
7.	Total Payments this Period (lines 5 + 6)	85Z8Z9		
OTHER ACTIVITY THIS REPORTING PERIOD				
8.	In-kind Contributions this Period (total of all Schedule A-1 pages)	0		
9.	Total Unpaid Debts at Close of Period (total of all Schedule D pages)	0		
10.	Total Loan Balance at Close of Period (Schedule C, column 5)	0		
CASH SUMMARY FOR PERIOD				
11.	Cash Balance at Beginning of Period (Schedule F, line 14 from last report)	0		
12.	Plus Total Receipts this Period (line 4 above)	+\$52829		
13.	Minus Total Payments this Period (line 7 above)	-\$528 ²⁹		
14.	Cash Balance at End of Period (must match reconciled bank account balance)	= 0.00		

^{*} If you forgave a loan or part of a loan during the report period, you need to enter the forgiven amount on line 2.a. and subtract it from the sum of lines 1, 2 & 3. This adjustment is needed so that the forgiven amount is not double-counted as a receipt.



For more information, please contact us at 512-833-9900

9200 Waterford Centre Blvd. Suite 100 Austin, TX 78758

OCT 3 0 2023

Order #224608

Order Date: 08/29/2023

Bill To:

Leroy Walker 41 BROAD ST # 2 Apt. #2 REAR Auburn ME 04210

Ship To:

Leroy Walker 41 BROAD ST AUBURN ME 04210

Item ID#	Product	Quantity	Price
530700	Economy Wire Stakes for Yard Signs - 10x24 inches	100	\$129.00
530698	Product Details: Car Magnets, 12" x 18", Single Sided, Full col	or 2	\$40.22
	PROOF WILL BE SENT BEFORE PRINTING		
	DESIGN NOTES: Hello. To leave a comment, click the MAKE A UPDATE option or for any assistance, call us at 512-833-9900. this looks fine for you and do not have any changes to make, select Approve to move this into production. Thanks Jamelyn FILES: 530698-JA-C1.png	If	
530699	Product Details: Corrugated Plastic 4mm, 18" x 24" (standard) Double Sided, 2 color, For Wire Stakes (sold separately)	, 100	\$285.00
	PROOF WILL BE SENT BEFORE PRINTING		
	DESIGN NOTES: Hello. All yard signs require a 5/8" border unless ordered as a FULL-COLOR print. If you would like to discuss this upgrade, please call 512-833-9900. Otherwise, clic Approve to send this to production. Thanks! -Jamelyn FILES: 530699-JA-C1.png	k	
Shipping Metho	od: Ground, Standard UPS	Item(s) Subtotal:	\$454.22
Credit Card Type: MASTERCARD (**** 8924)		Shipping & Handling:	\$74.07
		Discount:	\$0.00
		Total before tax:	\$528.29
	Estima	ted tax to be collected:	\$0.00
		Grand Total:	\$528.29



Cure Cannabis Company LLC

52-8746/2112

002268

500.0

32 Riverside Dr Auburn, Maine 04210 207-241-7328

Pay to the order of \$

Five County Credit Union Bath, Maine 04530

Authorized Signature

700021033910#02268 1:2112874631

RECEIVED 10/25/2023