



AUG 01 2025

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION		
Title (optional): ☒ Ms. ☐ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable	Party Affiliation:	Office Sought & District #: School Committee-2
Name: First misty	MI or Middle Name	Last Edgewomb
Mailing Address: 26 Oakland St		
City: Auburn	ZIP: 04210	Phone: 207-240-3910
Email: medgewomb22@gmail.com		

2. TREASURER INFORMATION		
Name: First Jennifer Kimble	MI or Middle Name	Last Kimble
Mailing Address: 71 Boulder Drive		Phone: 207-807-2035
City: Auburn	ZIP: 04210	Email: jennyberg@hotmail.com

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)		
Name: First	MI or Middle Name	Last
Mailing Address:		Phone:
City:	ZIP:	Email:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, <u>Misty Edgcomb</u> , certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate <u>[Signature]</u>	Date <u>8/10/25</u>

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of Candidate _____	Date _____
Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____.	
Signature of Notary/Attorney-at-law _____ (Seal is optional)	My commission expires _____ (Date)
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

Sworn Falsification is a Class D crime. (17-A MRS § 453)



OCT 24 2025

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2025 Campaign Finance Report For Municipal Candidates

Name of Candidate:	Misty Edgecomb		☐ Check if any information has changed from previous report
Street Address:	26 Oakland St		
City and ZIP:	Auburn ME	Phone Number:	207-240-3910
Email:	medgecomb022@gmail.com		
Office Sought:	School Committee	District Number (if applicable):	Ward 2
Name of Treasurer:	Jennifer Kimble	☐ Check if any information has changed from previous report	
Mailing Address:	71 Boulder Dr		
City and ZIP:	Auburn 04210	Phone Number:	207.807.2035
Email:	jennyberg@hotmail.com		

Report Name	Filing Period	Filing Deadline
☐ January Semiannual	07/01/2024 – 12/31/2024	01/15/2025
☐ 11-Day Pre-June Election	If filing first report: Beginning of campaign – 05/27/2025 OR If January Semiannual filed: 01/01/2025 – 05/27/2025	05/30/2025
☐ 42-Day Post-June Election	05/28/2025 – 07/15/2025	07/22/2025
☐ July Semiannual	01/01/2025 – 06/30/2025	07/15/2025
☒ 11-Day Pre-Nov. Election	If filing first report: Beginning of campaign – 10/21/2025 OR If 2025 July Semiannual filed: 07/01/2025 – 10/21/2025	10/24/2025
☐ 42-Day Post-Nov. Election	10/22/2025 – 12/09/2025	12/16/2025
☐ Amendment to:		
☐ Other (specify):		
☐ Check if campaign had not activity for the reporting period. (No other pages are required)		

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

Treasurer Signature

Date

Candidate Signature

Date

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S. § 453).

SCHEDULE A
CASH CONTRIBUTIONS

- 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 \$600 in any election for municipal office.

Contributor Types

- 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	Type	Amount
10/09/2025	Misty Edgecomb	Business Owner	Self	1	\$236.80
10/21/2025	Misty Edgecomb	Business Owner	Self	1	\$168.80
Total Cash Contributions (this page only)➔					\$405.60
(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)					

**SCHEDULE B
EXPENDITURES**

- 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 **must** list the family or household relationship in the remarks section.
- Duplicate as needed

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

EXPENDITURE TYPES

APP	Apparel (t-shirts, hats, embroidery, etc.)	OTH	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)	TKT	Entrance cost to event (beer, snacks, 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 media and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Type	Remark	Amount
10/09/2025	Yard Sign Plus	LIT		\$236.80
10/21/2025	Evergreen Printing	LIT		\$168.80

Total Expenditures (this page only) →
(combined totals from all Schedule B pages must be listed on Schedule F, Line 5)

\$405.60

**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)	\$405.60
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.]	\$405.60
Expenditures	
5. Expenditures this Period (total of all Schedule B pages)	\$405.60
6. Loan Repayments this Period (Schedule C, column 3)	0
7. Total Payments this Period (lines 5 + 6)	\$405.60
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)	+ \$405.60
13. Minus Total Payments this Period (line 7 above)	- \$405.60
14. Cash Balance at End of Period (must match reconciled bank account balance)	= 0

* 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.



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CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION		
Title (optional): ☒ Ms. ☐ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: Democratic
Office Sought & District #: School Committee Ward 4		
Name: First Quinn	MI or Middle Name E	Last Gormley
Mailing Address: 3 Academy St		
City: Auburn	ZIP: 04210	Phone: 207 832 1719
Email: Quinn.E.gormley@gmail.com		

2. TREASURER INFORMATION		
Name: First Ezra	MI or Middle Name N	Last Aistrop-Gormley
Phone: 207-402-6454		
Mailing Address: 3 Academy St		
City: Auburn	ZIP: 04210	Email: Ezra.aistrop07@gmail.com

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2A. DEPUTY TREASURER INFORMATION (optional)		
Name: First	MI or Middle Name	Last
Phone:		
Mailing Address:		
City:	ZIP:	Email:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City:	ZIP: Email:

Name:	Title:	Phone:
Mailing Address:	City:	ZIP: Email:

5. CERTIFICATION	
I, <u>Quinn Gormley</u> , certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate <u></u>	Date <u>08/20/2025</u>

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy. Signature of Candidate _____ Date _____ Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____. Signature of Notary/Attorney-at-law _____ My commission expires _____ (Seal is optional) (Date) REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

Sworn Falsification is a Class D crime. (17-A MRS § 453)



Rec'd 10/24/25 efc

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Phone: (207) 333-6600
Fax: (207)333-6623

2025 Campaign Finance Report For Municipal Candidates

Name of Candidate:	Quinn Gomley		☐ Check if any information has changed from previous report
Street Address:	3 Academy ST		
City and ZIP:	Auburn, ME, 04210	Phone Number:	207-832-1719
Email:	quinn.e.gormley@gmail.com		
Office Sought:	School Committee	District Number (if applicable):	Ward 4
Name of Treasurer:	Ezra Aistrop-Gormley		☐ Check if any information has changed from previous report
Mailing Address:	3 Academy ST		
City and ZIP:	Auburn, ME, 04210	Phone Number:	207-402-6454
Email:	ezraaistrop07@gmail.com		
Report Name	Filing Period	Filing Deadline	
☐ January Semiannual	07/01/2024 – 12/31/2024	01/15/2025	
☐ 11-Day Pre-June Election	If filing first report: Beginning of campaign – 05/27/2025 OR If January Semiannual filed: 01/01/2025 – 05/27/2025	05/30/2025	
☐ 42-Day Post-June Election	05/28/2025 – 07/15/2025	07/22/2025	
☐ July Semiannual	01/01/2025 – 06/30/2025	07/15/2025	
☒ 11-Day Pre-Nov. Election	If filing first report: Beginning of campaign – 10/21/2025 OR If 2025 July Semiannual filed: 07/01/2025 – 10/21/2025	10/24/2025	
☐ 42-Day Post-Nov. Election	10/22/2025 – 12/09/2025	12/16/2025	
☐ Amendment to:			
☐ Other (specify):			
☐ Check if campaign had not activity for the reporting period. (No other pages are required)			

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

Treasurer Signature

10/24/2025
Date

Candidate Signature

10/24/2025
Date

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S. § 453).

**SCHEDULE A
CASH CONTRIBUTIONS**

- 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 \$600 in any election for municipal office.

Contributor Types

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Type	Amount
9/5/2025	Sue Aistrop801 Greenwich St, Philadelphia, PA 19147, United States	Business Administrator	Habonim Dror North America	2	105.75
9/5/2025	Carrie Jadud64 Montello St, Lewiston, ME 04240, United States	Community Organizer	Maine People's Alliance	2	53.04
9/5/2025	Jessica Milinichik52 Sandy Beach Rd, Auburn, ME 04210, United States	Director of Education & Community	Planned Parenthood of Northern New England	2	53.04
9/5/2025	Destie Sprague14 Park St, Bath, ME 04540, United States	Executive Director	Maine Women's Lobby	2	53.04
9/12/25	Aimee Martin11 Lombard ST, Brunswick, ME, 04011	Associate Director	Planned Parenthood Federation of America	2	53.04
9/14/25	Jennie Butler49 Carriage Hill Dr, Windham, ME 04062, United States	Professor	University of Southern Maine	2	53.04
9/23/25	Kimberly Simmons71 Quebec Street, Portland, ME 04101, United States	Sociologist	University of Southern Maine	2	105.75
9/23/25	Chris Clapp3431 Morganton Blvd, Morganton, NC 28655, United States	Physician	Mountain View Pediatrics	2	100
9/23/25	Ariel Linet261 Maine Avenue, Portland, ME 04103, United States	Info Requested	Info Requested	2	53.04
Total Cash Contributions (this page only)→ (combined totals from all Schedule A pages must be listed on Schedule F, Line 1)					629.74

Candidate Name: Quinn GormleyPage 2 of 2
Schedule A only**SCHEDULE A
CASH CONTRIBUTIONS****Contributor Types**

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Type	Amount
9/24/25	Samara Cogan5929 Beverly Lane, Everett, WA 98203, United States	Project manager	Array	2	53.04
9/24/25	Amy Brewsteinapt 14b 1901 Walnut Street, Philadelphia, PA 19103, United States	Retired	N/A	2	53.04
9/24/25	Whitley Lehto39 Forsythia Lane, Windham, ME 04062, United States	Bioinformatics Analyst	CCRM	2	53.04
9/24/25	Jayson Hunt200 Hancock Street, Bangor, ME 04401, United States	Program manager	info requested	2	53.04
9/24/25	Erika Hewitt12 Clifton Street, Bath, ME 04530, United States	Minister	UUA	2	50
10/21/25	Contributors Giving \$50 or Less			6	413.82

Total Cash Contributions (this page only) →
(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)

675.98

SCHEDULE A-1
IN-KIND CONTRIBUTIONS

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 \$600 in any election for municipal office.

Contributor Types

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Total In-Kind Contributions (this page only) → (combined totals from all Schedule A-1 pages must be listed on Schedule F, Line 8)					0

Page ____ of ____
Schedule A-1 only

**SCHEDULE B
EXPENDITURES**

- 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 **must** list the family or household relationship in the remarks section.
- Duplicate as needed

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

EXPENDITURE TYPES

APP	Apparel (t-shirts, hats, embroidery, etc.)	OTH	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)	TKT	Entrance cost to event (beer, snacks, 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 media and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Type	Remark	Amount
9/30/2025	Maine Democratic Party	CON	Maine Dems VAN Access	20.00
10/2/2025	Signs.com	LIT	Campaign Signs	423.41
10/3/2025	vistaprint	LIT	Postcards, Palmcards	224.90
10/14/2025	USPS	POS	Stamps	78.00
10/20/2025	Walmart	OFF	hole punches, clip boards	66.55
10/20/2025	Staples	OFF	labels	21.96
Total Expenditures (this page only) → (combined totals from all Schedule B pages must be listed on Schedule F, Line 5)				834.82

**SCHEDULE B
EXPENDITURES**

EXPENDITURE TYPES				
APP	Apparel (t-shirts, hats, embroidery, etc.)	OTH	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)	TKT	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	Type	Remark	Amount
10/21/2025	Stripe	OTH	processing fee for online donations	85.93
Total Expenditures (this page only) → (combined totals from all Schedule B pages must be listed on Schedule F, Line 5)				85.93

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.

Date	Creditor's Name and Address	Purpose	Amount

Total Unpaid Debts and Obligations (this page only) →
(combined totals from all Schedule B pages must be listed on Schedule F, Line 9)

0

Candidate Name: Quinn GormleyDate: 10/24/25**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)	1,305.72
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.]	1,305.72
Expenditures	
5. Expenditures this Period (total of all Schedule B pages)	920.75
6. Loan Repayments this Period (Schedule C, column 3)	0
7. Total Payments this Period (lines 5 + 6)	920.75
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)	+ 1,305.72
13. Minus Total Payments this Period (line 7 above)	- 920.75
14. Cash Balance at End of Period (must match reconciled bank account balance)	= 384.97

* 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.



AUG 18 2025

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION			
Title (optional): ☒ Ms. ☐ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: Unenrolled	Office Sought & District #: School Board #88
Name: First Lydia	MI or Middle Name M	Last Chapman	
Mailing Address: 51 Portland Way			
City: Auburn	ZIP: 04210	Phone: (207) 312-8101	
Email: lydia.chapman411@gmail.com			

2. TREASURER INFORMATION			
Name: First Lydia	MI or Middle Name M	Last Chapman	Phone: (207) 312-8101
Mailing Address: 51 Portland Way			
City: Auburn	ZIP: 04210	Email: lydia.chapman411@gmail.com	

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)			
Name: First	MI or Middle Name	Last	Phone:
Mailing Address:			
City:	ZIP:	Email:	

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, <u>Lydia Chapman</u> , certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate <u><i>Lydia Chapman</i></u>	Date <u>8-7-2025</u>

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of Candidate _____	Date _____
Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____.	
Signature of Notary/Attorney-at-law _____ (Seal is optional)	My commission expires _____ (Date)
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

Sworn Falsification is a Class D crime. (17-A MRS § 453)



Rec'd 10/23/25

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

2025 Campaign Finance Report For Municipal Candidates

Name of Candidate:	Lydia Chapman		☐ Check if any information has changed from previous report
Street Address:	51 Portland Way		
City and ZIP:	Auburn 04210	Phone Number:	(207) 312-8101
Email:	lydia.chapman411@gmail.com		
Office Sought:	School Board Committee	District Number (if applicable):	
Name of Treasurer:	Lydia Chapman		☐ Check if any information has changed from previous report
Mailing Address:	51 Portland Way		
City and ZIP:	Auburn 04210	Phone Number:	(207) 312-8101
Email:	lydia.chapman411@gmail.com		

Report Name	Filing Period	Filing Deadline
☐ January Semiannual	07/01/2024 – 12/31/2024	01/15/2025
☐ 11-Day Pre-June Election	If filing first report: Beginning of campaign – 05/27/2025 OR If January Semiannual filed: 01/01/2025 – 05/27/2025	05/30/2025
☐ 42-Day Post-June Election	05/28/2025 – 07/15/2025	07/22/2025

☐ July Semiannual	01/01/2025 – 06/30/2025	07/15/2025
☐ 11-Day Pre-Nov. Election	If filing first report: Beginning of campaign – 10/21/2025 OR If 2025 July Semiannual filed: 07/01/2025 – 10/21/2025	10/24/2025
☐ 42-Day Post-Nov. Election	10/22/2025 – 12/09/2025	12/16/2025
☐ Amendment to:		
☐ Other (specify):		
☐ Check if campaign had not activity for the reporting period. (No other pages are required)		

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

Treasurer Signature

Date

Candidate Signature

Date

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S. § 453).

SCHEDULE A CASH CONTRIBUTIONS

- 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 \$600 in any election for municipal office.

Contributor Types

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Type	Amount
9-3-25	Renee Roy 23 Sunderland Dr 04210	Realtor	Roy Realty LLC Machic	2	500.00
9-4-25	Kryston Chapman 51 Eastman Ln 04210	Teacher	Auburn School Department	2	600.00
9-6-25				7	10.00
9-6-25				7	10.00
9-9-25	Laurel Libby 442 Park Ave 04210	PAC'S PAC'S	Fight For Freedom	4	600.00
9-11-25	Stephanie St Laurent 22 Briarcliff Knl 04210	Owner CEO	Roopers	2	600.00
10-10-25	Mechelle Turcotte 33 Sandy Ter 04102	Secretary	Maine Health	2	50.00

Total Cash Contributions (this page only) →

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

2370.00

**SCHEDULE A
CASH CONTRIBUTIONS**

Contributor Types

- 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	Type	Amount

Total Cash Contributions (this page only) →
(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)

Candidate Name: Lydia Chapman

Page 1 of 1
Schedule A-1 only

SCHEDULE A-1
IN-KIND CONTRIBUTIONS

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 \$600 in any election for municipal office.

Contributor Types

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received: 10-13-25	Contributor's Name, Address, Zip: Lydia Chapman 51 Portland Way 04210	Occupation: Barista	Employer: Starbucks	Type: 1	Amount: 33.74
Description of Goods/Services: Envelopes					
Date Received: 10-21-25	Contributor's Name, Address, Zip: Quentin Chapman 51 Eastman Ln 04210	Occupation: General Manager	Employer: Roopers	Type: 2	Amount: 158.00
Description of Goods/Services: Printed Letters					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					

Total In-Kind Contributions (this page only) →
(combined totals from all Schedule A-1 pages must be listed on Schedule F, Line 8) **191.74**

Candidate Name:

Lydia Chapman

Page 1 of 1
Schedule B only**SCHEDULE B
EXPENDITURES****EXPENDITURE TYPES**

APP	Apparel (t-shirts, hats, embroidery, etc.)	OTH	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)	TKT	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 media and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Type	Remark	Amount
9-23-25	Spectrum Marketing Companies	LIT	Palm Cards	\$460.00
10-6-25	Spectrum Marketing Companies	LIT	Signs	\$396.00
10-21-25	United States Postal Service	MHS	Stamps	\$468.00

Total Expenditures (this page only) →

(combined totals from all Schedule B pages must be listed on Schedule F, Line 5)

1324.00

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.

Date	Creditor's Name and Address	Purpose	Amount
Total Unpaid Debts and Obligations (this page only) → (combined totals from all Schedule B pages must be listed on Schedule F, Line 9)			

Candidate Name:

Lydia Chapman

Date:

10-23-25

**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)	2370.00
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.]	2370.00

Expenditures

5.	Expenditures this Period (total of all Schedule B pages)	1324.00
6.	Loan Repayments this Period (Schedule C, column 3)	0
7.	Total Payments this Period (lines 5 + 6)	1324.00

OTHER ACTIVITY THIS REPORTING PERIOD

8.	In-kind Contributions this Period (total of all Schedule A-1 pages)	191.74
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)	191.74

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)	+ 2370.00
13.	Minus Total Payments this Period (line 7 above)	- 1324.00
14.	Cash Balance at End of Period (must match reconciled bank account balance)	= 1046.00

* 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.



~~AUG 08 2025~~

AUG 08 2025

~~AUG 08 2025~~

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☒ No

1. CANDIDATE INFORMATION			
Title (optional): ☐ Ms. ☒ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: Dem	Office Sought & District #: At-Large School Committee
Name: First Olivia	MI or Middle Name Jaye	Last Rich	
Mailing Address: 43 Davis Ave			
City: Auburn ME		ZIP: 04210	Phone: 903-819-8918
Email: ojayerich@gmail.com			

2. TREASURER INFORMATION			
Name: First Dakota	MI or Middle Name L	Last Rich	Phone: 405-812-0854
Mailing Address: 43 Davis Ave			
City: Auburn	ZIP: 04210	Email: DakotaLRich@gmail.com	

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)			
Name: First	MI or Middle Name	Last	Phone:
Mailing Address:			
City:	ZIP:	Email:	

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City:	ZIP: Email:

Name:	Title:	Phone:
Mailing Address:	City:	ZIP: Email:

5. CERTIFICATION
I, _____, certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)
Signature of Candidate _____ Date _____

6. REPORTING EXEMPTION REQUEST
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy. Signature of Candidate _____ Date _____ Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____. Signature of Notary/Attorney-at-law _____ My commission expires _____ (Seal is optional) (Date) REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.

Sworn Falsification is a Class D crime. (17-A MRS § 453)



Rec'd 10/24/25 gpc

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

2025 Campaign Finance Report For Municipal Candidates

Name of Candidate:	Olivia Jaye Rich		☐ Check if any information has changed from previous report
Street Address:	43 Davis Ave		
City and ZIP:	Auburn 04210	Phone Number:	(903) 819-8918
Email:	ojayerich@gmail.com		
Office Sought:	School Committee At-Large	District Number (if applicable):	At-Large
Name of Treasurer:	Dakota Rich		☐ Check if any information has changed from previous report
Mailing Address:	43 Davis Ave		
City and ZIP:	Auburn 04210	Phone Number:	(405) 812-0854
Email:	Dakota L Rich@gmail.com		

Report Name	Filing Period	Filing Deadline
☐ January Semiannual	07/01/2024 – 12/31/2024	01/15/2025
☐ 11-Day Pre-June Election	If filing first report: Beginning of campaign – 05/27/2025 OR If January Semiannual filed: 01/01/2025 – 05/27/2025	05/30/2025
☐ 42-Day Post-June Election	05/28/2025 – 07/15/2025	07/22/2025
☐ July Semiannual	01/01/2025 – 06/30/2025	07/15/2025
☒ 11-Day Pre-Nov. Election	If filing first report: Beginning of campaign – 10/21/2025 OR If 2025 July Semiannual filed: 07/01/2025 – 10/21/2025	10/24/2025
☐ 42-Day Post-Nov. Election	10/22/2025 – 12/09/2025	12/16/2025
☐ Amendment to:		
☐ Other (specify):		
☐ Check if campaign had not activity for the reporting period. (No other pages are required)		

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

Treasurer Signature

Date

Candidate Signature

Date

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S. § 453).

**SCHEDULE A
CASH CONTRIBUTIONS**

- 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 \$600 in any election for municipal office.

Contributor Types

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Type	Amount
8/11/25	Jaye Rich 43 DAVIS Ave Auburn 04210	Teacher	Lewiston Public Schools	1	\$15.83
9/14/25	Benjamin + Barbara Lounsbury 505 W Auburn Rd 04210	Retired -		2	\$100
8/25/25	Sue Martin 1810 DAVIS Ave 04210	Retired -		2	\$100
9/29/25	Jaye Rich 43 DAVIS Ave 04210	Teacher	Lewiston Public Schools	1	\$250
	Contributors giving \$50 or less lump sum	-	-	7	\$530
Total Cash Contributions (this page only) → (combined totals from all Schedule A pages must be listed on Schedule F, Line 1)					995.83

Candidate Name: _____

Page ____ of ____
Schedule B only**SCHEDULE B
EXPENDITURES****EXPENDITURE TYPES**

APP	Apparel (t-shirts, hats, embroidery, etc.)	OTH	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)	TKT	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 media and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Type	Remark	Amount
7-23-25	Staples	Lit	vote Rich Postcards	\$ 73.90
9-30-25	Signs on the cheap	Lit	Yard Signs	\$ 674.48
10-6-25	USPS	Lit	Stamps	\$ 78
10-22-25	Staples	Lit	vote Rich cards	\$ 139.18

Total Expenditures (this page only) →
(combined totals from all Schedule B pages must be listed on Schedule F, Line 5)

965.56

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 \$600 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.

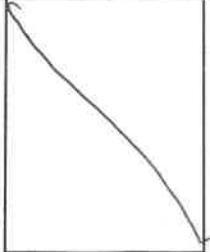
	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
Lender's Name and Address	Loan Balance at Beginning of Period	ACTIVITY THIS PERIOD (report amount and date)			LOAN BALANCE AT END OF PERIOD (1+2) – 3 – 4
		Amount Loaned this Period	Amount Repaid this Period	Amount Forgiven this Period	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: 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 →					

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.

Date	Creditor's Name and Address	Purpose	Amount

Total Unpaid Debts and Obligations (this page only) →
(combined totals from all Schedule B pages must be listed on Schedule F, Line 9)



Candidate Name:

Olivia Jaye Rich

Date:

10-24-25

**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)	995.83
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.]	995.83

Expenditures

5.	Expenditures this Period (total of all Schedule B pages)	965.56
6.	Loan Repayments this Period (Schedule C, column 3)	0
7.	Total Payments this Period (lines 5 + 6)	965.56

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)	+ 995.83
13.	Minus Total Payments this Period (line 7 above)	- 965.56
14.	Cash Balance at End of Period (must match reconciled bank account balance)	= 30.27

* 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.



AUG 25 2025

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☒ No

1. CANDIDATE INFORMATION			
Title (optional): ☐ Ms. ☐ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: Republican	Office Sought & District #: School Committee
Name: First Nancy	MI or Middle Name M.	Last Pulk	
Mailing Address: 497 South Main St			
City: Auburn ME		ZIP: 04210	Phone: 207-212-3669
Email: nmpulk@gmail.com			

2. TREASURER INFORMATION			
Name: First self	MI or Middle Name	Last	Phone:
Mailing Address:			
City:	ZIP:	Email:	

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)			
Name: First n/a	MI or Middle Name	Last	Phone:
Mailing Address:			
City:	ZIP:	Email:	

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, <u>Nancy M. Palk</u> , certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate <u>[Signature]</u>	Date <u>8/18/2025</u>

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy. Signature of Candidate _____ Date _____ Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____. Signature of Notary/Attorney-at-law _____ My commission expires _____ (Seal is optional) (Date) REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

Sworn Falsification is a Class D crime. (17-A MRS § 453)



10/22/25 Rec'd
EJC

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

2025 Campaign Finance Report For Municipal Candidates

Name of Candidate:	Nancy Pulk		☐ Check if any information has changed from previous report
Street Address:	497 S. Main St		
City and ZIP:	Auburn, ME 04210	Phone Number:	207-402-1285
Email:	nmpulk@gmail.com		
Office Sought:	School Board At-Large	District Number (if applicable):	
Name of Treasurer:	Nancy Pulk		☐ Check if any information has changed from previous report
Mailing Address:	Same		
City and ZIP:		Phone Number:	
Email:			

Report Name	Filing Period	Filing Deadline
☐ January Semiannual	07/01/2024 – 12/31/2024	01/15/2025
☐ 11-Day Pre-June Election	If filing first report: Beginning of campaign – 05/27/2025 OR If January Semiannual filed: 01/01/2025 – 05/27/2025	05/30/2025
☐ 42-Day Post-June Election	05/28/2025 – 07/15/2025	07/22/2025
☐ July Semiannual	01/01/2025 – 06/30/2025	07/15/2025
☒ 11-Day Pre-Nov. Election	If filing first report: Beginning of campaign – 10/21/2025 OR If 2025 July Semiannual filed: 07/01/2025 – 10/21/2025	10/24/2025
☐ 42-Day Post-Nov. Election	10/22/2025 – 12/09/2025	12/16/2025
☐ Amendment to:		
☐ Other (specify):		
☐ Check if campaign had not activity for the reporting period. (No other pages are required)		

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

Treasurer Signature

10/22/25
Date

Candidate Signature

10/22/25
Date

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S. § 453).

Candidate Name: Nancy PulkPage 1 of 2
Schedule A only**SCHEDULE A
CASH CONTRIBUTIONS**

- 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 \$600 in any election for municipal office.

Contributor Types

- 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	Type	Amount
9/3/25	Renee Roy / Roy Realty 155 Center St Auburn	Realtor	Roy Realty	3	500.00
9/7/25	George He Main 200 Stetson Rd #435 Auburn, ME 04210	Retired	N/A	2	100.00
9/7/25	Muriel Land 200 Stetson Rd #323 Auburn, ME 04210	Retired	N/A	2	100.00
9/7/25	Nancy Pulk 497 S. Main St Auburn, ME 04210	Controller	PRH Mgmt	1	700.00
9/8/25	Carey Zembas PO Box 337 Sagadahoc, ME 04280	Entrepreneur	Collaborative Cleaners	2	100.00
9/8/25	NRH of CM PO Box 412 Auburn, ME 04212	Property Mgrs	NRH of CM	3	500.00
9/8/25	Sandra Pulk 29 Pinewood Rd Wiscasset, ME 04578			7	25.00
9/9/25	Fight for Freedom PO Box 735 Auburn, ME 04212			4	600.00
9/15/25	Advanced Microsystems 647 Main St Lewiston, ME 04240	IT Professionals	Advanced Microsystems	3	150.00
9/15/25	Thomas Ouellette PO Box 2237 Lewiston, ME 04240	Business Owner	Budget Document Technologies	2	125.00
Total Cash Contributions (this page only) →					2900.00
(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)					

Candidate Name: Nancy Pulk

Page 1 of 2
Schedule A-1 only

SCHEDULE A-1
IN-KIND CONTRIBUTIONS

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 \$600 in any election for municipal office.

Contributor Types

- | | |
|---|------------------------------------|
| 1 Candidate and Candidate's Spouse/Domestic Partner | 5 Political Party Committees |
| 2 Other Individuals | 6 Other Candidates and Committees |
| 3 Commercial Source | 7 Contributors giving \$50 or less |
| 4 Political Action Committees | 8 Transfer from previous campaign |

Date Received: 9/5/25	Contributor's Name, Address, Zip: Evergreen Printing 2 Great Falls Plaza Auburn, ME	Occupation: Printer	Employer: Evergreen Printing	Type: 3	Amount: 100.00
Description of Goods/Services: Printed Campaign Literature					
Date Received: 10/17/25	Contributor's Name, Address, Zip: Nancy Pulk-self	Occupation: Controller	Employer: NRH Mgmt	Type: 1	Amount: 26.61
Description of Goods/Services: Mailing labels + ofc sply purchased from Amazon					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					

Total In-Kind Contributions (this page only) →
(combined totals from all Schedule A-1 pages must be listed on Schedule F, Line 8)

126.61

Candidate Name: Nancy Pulk

Page 2 of 2
Schedule A-1 only

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

Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					
Date Received:	Contributor's Name, Address, Zip:	Occupation:	Employer:	Type:	Amount:
Description of Goods/Services:					

Total In-Kind Contributions (this page only) →
(combined totals from all Schedule A-1 pages must be listed on Schedule F, Line 8)



Candidate Name:

Nancy Pulk

Page 1 of 2
Schedule B only**SCHEDULE B
EXPENDITURES**

- 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 **must** list the family or household relationship in the remarks section.
- Duplicate as needed

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

APP	Apparel (t-shirts, hats, embroidery, etc.)	OTH	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)	TKT	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 media and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Type	Remark	Amount
9/22/25	Spectrum Marketing	LIT	Palmcards	610.00
10/6/25	Spectrum Marketing	LIT	Signs	646.25
10/6/25	Maine Revenue Services	LIT	Use tax on Spectrum purchases	69.09
9/24/25	Venmo	OTH	bank fee	2.00
10/19/25	Evergreen Printing	LIT	Post mailing cards	422.00
10/20/25	USPS	POS	postage stamps	1235.60
Total Expenditures (this page only) →				2984.94

(combined totals from all Schedule B pages must be listed on Schedule F, Line 5)

Candidate Name: Nancy Pulk

Page 1 of 1
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 \$600 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
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 Repaid this Period	Amount Forgiven this Period	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
		Date: Amount:	Date: Amount:	Date: Amount:	
Totals for each column →		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

Candidate Name: Nancy PulkDate: 10/22/25**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)	3100.00
2.	Loans this Period (Schedule C, column 2)	—
2.a.	Adjustment for Forgiven Loan Amount this Period (Schedule C, column 4)*	- —
3.	Other Cash Receipts this Period (interest, etc.)	—
4.	Total Receipts this Period [(lines 1 + 2 + 3) – line 2.a.]	3100.00

Expenditures

5.	Expenditures this Period (total of all Schedule B pages)	2984.94
6.	Loan Repayments this Period (Schedule C, column 3)	
7.	Total Payments this Period (lines 5 + 6)	2984.94

OTHER ACTIVITY THIS REPORTING PERIOD

8.	In-kind Contributions this Period (total of all Schedule A-1 pages)	126.61
9.	Total Unpaid Debts at Close of Period (total of all Schedule D pages)	
10.	Total Loan Balance at Close of Period (Schedule C, column 5)	

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)	+ 3100.00
13.	Minus Total Payments this Period (line 7 above)	- 2984.94
14.	Cash Balance at End of Period (must match reconciled bank account balance)	= 115.06

* 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.



AUG 21 2025

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207)333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION		
Title (optional): ☐ Ms. ☐ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation:
Office Sought & District #:		
Name: First <i>Pamela</i>	MI or Middle Name <i>F</i>	Last <i>Albert</i>
Mailing Address: <i>96 Field Ave</i>		
City: <i>Auburn</i>	ZIP: <i>04210</i>	Phone: <i>207 632 0331</i>
Email: <i>pamela.f.albert@gmail.com</i>		

2. TREASURER INFORMATION	
Name: First MI or Middle Name Last 	Phone:
Mailing Address: 	
City: ZIP: 	Email:

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)	
Name: First MI or Middle Name Last 	Phone:
Mailing Address: 	
City: ZIP: 	Email:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, _____, certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate _____	Date _____

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of Candidate _____	Date <u>8/21/25</u>
Subscribed and sworn (affirmed) to before me this <u>21</u> day of <u>August</u> , 20 <u>25</u>	
Signature of Notary/Attorney-at-law _____ (Seal is optional)	My commission expires <u>Maine</u> My Commission (Expires) <u>January 11, 2030</u>
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

Sworn Falsification is a Class D crime. (17-A MRS § 453)



AUG 21 2025

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION		
Title (optional): ☐ Ms. ☐ Mrs. ☒ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: <i>Republican</i>
Office Sought & District #: <i>School Ward 5</i>		
Name: First <i>Daniel</i>	MI or Middle Name <i>I</i>	Last <i>Poisson Sr.</i>
Mailing Address: <i>26 Barnold Street</i>		
City: <i>Auburn</i>	ZIP: <i>04210</i>	Phone: <i>576-7891</i>
Email: <i>DFPoisson@aol.com</i>		

2. TREASURER INFORMATION		
Name: First 	MI or Middle Name 	Last
Phone: 		
Mailing Address: 		
City: 	ZIP: 	Email:

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)		
Name: First 	MI or Middle Name 	Last
Phone: 		
Mailing Address: 		
City: 	ZIP: 	Email:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:
Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, _____, certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate _____	Date _____

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of Candidate <u>Daniel R. Porsini Sr.</u>	Date <u>8/20/2025</u>
Subscribed and sworn (affirmed) to before me this <u>21</u> day of <u>August</u> , 20 <u>25</u>	
Signature of Notary/Attorney-at-law <u>Tena P. Nelson</u> (Seal is optional)	My commission expires <u>March 21, 2027</u> (Date)
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

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CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION		
Title (optional): ☐ Ms. ☐ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation:
Office Sought & District #: <i>School Committee Ward 3</i>		
Name: First <i>Patricia</i>	MI or Middle Name <i>M.</i>	Last <i>Gautier</i>
Mailing Address: <i>136 Pride Rd</i>		
City: <i>Auburn</i>	ZIP: <i>ME</i>	Phone: <i>207-240-1914</i>
Email: <i>pdgautier1971@aol.com</i>		

2. TREASURER INFORMATION		
Name: First	MI or Middle Name	Last
Phone:		
Mailing Address:		
City:	ZIP:	Email:

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)		
Name: First	MI or Middle Name	Last
Phone:		
Mailing Address:		
City:	ZIP:	Email:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

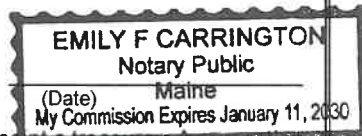
DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:
Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, <u>PATRICIA M. GAUTIER</u> , certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate <u>Patricia M. Gautier</u>	Date <u>7/14/2025</u>

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of Candidate <u>Patricia M. Gautier</u>	Date <u>7/14/2025</u>
Subscribed and sworn (affirmed) to before me this <u>14</u> day of <u>July</u> , 20 <u>25</u> .	
Signature of Notary/Attorney-at-law <u>[Signature]</u> (Seal is optional)	My commission expires
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	



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AUG 21 2025

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Fax: (207) 333-6623

CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☐ No

1. CANDIDATE INFORMATION		
Title (optional): ☐ Ms. ☒ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: _____
Office Sought & District #: School Committee - Ward 5		
Name: First CONSTANCE	MI or Middle Name JEANNE	Last MERCIER
Mailing Address: 21 Fourth Street		
City: AUBURN MAINE	ZIP: 04210	Phone: 207 740-40-63
Email: none		

2. TREASURER INFORMATION			
Name: First 	MI or Middle Name 	Last 	Phone:
Mailing Address: 			
City: 	ZIP: 	Email: 	

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)			
Name: First 	MI or Middle Name 	Last 	Phone:
Mailing Address: 			
City: 	ZIP: 	Email: 	

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

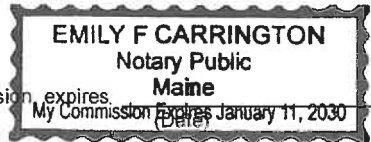
4. POLITICAL COMMITTEE INFORMATION (optional)		
Name:	Phone:	
Address of Campaign Headquarters:	City:	ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:
Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, _____, certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate _____	Date _____

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy.	
Signature of Candidate <u>Constantine J. Hernandez</u>	Date <u>8-21-25</u>
Subscribed and sworn (affirmed) to before me this <u>21</u> day of <u>August</u> , 20 <u>25</u>	
Signature of Notary/Attorney-at-law _____ (Seal is optional)	
REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

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CANDIDATE REGISTRATION

Notice: Changes to registration information must be filed within 10 days in writing or by e-mail to the Clerk's office

Is this an amendment? ☐ Yes ☒ No

1. CANDIDATE INFORMATION		
Title (optional): ☐ Ms. ☒ Mrs. ☐ Mr. ☐ Mx. ☐ Dr. ☐ Honorable		Party Affiliation: <u>Democrat</u>
Office Sought & District #: <u>School Com. Ward 1</u>		
Name: First <u>Karin</u>	MI or Middle Name <u>M</u>	Last <u>McGuigan</u>
Mailing Address: <u>444 Turner St.</u>		
City: <u>Auburn</u>	ZIP: <u>04210</u>	Phone: <u>(207) 740-6258</u>
Email: <u>Kmcguigan@auburnschl.edu</u>		

2. TREASURER INFORMATION	
Name: First MI or Middle Name Last Phone: 	
Mailing Address: 	
City: ZIP: 	Email:

DESIGNATION OF TREASURER: A candidate for municipal office in towns and cities with a population of greater than 15,000 must appoint a treasurer no later than 10 days after becoming a candidate, and before accepting contributions, making expenditures or incurring obligations. No later than 10 days after appointing a treasurer, the candidate must register with the Clerk's office the name and address of the candidate and treasurer. The treasurer is responsible for maintaining campaign records and for filing reports. (21-A MRS § 1013-A)

2A. DEPUTY TREASURER INFORMATION (optional)	
Name: First MI or Middle Name Last Phone: 	
Mailing Address: 	
City: ZIP: 	Email:

DESIGNATION OF DEPUTY TREASURER (optional): The candidate may appoint a deputy treasurer, who must be reported to the Clerk's office no later than 10 days after the appointment. The deputy, when acting in the absence of the treasurer, has the same powers and responsibilities as the treasurer. (21-A MRS § 1013-A (1)(A)(1)).

3. AUTHORIZED AGENT INFORMATION (optional)		
Name:	Phone:	Email:
Name:	Phone:	Email:

DESIGNATION OF AUTHORIZED AGENT (optional): Please use this section to designate individuals, other than the treasurer and deputy treasurer, authorized to file reports on your behalf.

4. POLITICAL COMMITTEE INFORMATION (optional)	
Name:	Phone:
Address of Campaign Headquarters:	City: ZIP:

DESIGNATION OF POLITICAL COMMITTEE (optional): A candidate may authorize one political committee to promote the candidate's election. The committee treasurer is the treasurer appointed in Section 2 of the registration. No later than 10 days after appointing a political committee, the candidate must register the name of the committee and the committee officers, if appointed. (21-A MRS § 1013-A (1) (B))

Committee Officers (use additional pages, if necessary):

Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:
Name:	Title:	Phone:
Mailing Address:	City: ZIP:	Email:

5. CERTIFICATION	
I, _____, certify that the information in this registration is true, accurate and complete. (Print Candidate's Full Name)	
Signature of Candidate _____	Date _____

6. REPORTING EXEMPTION REQUEST	
Only county and municipal candidates, and legislative candidates in an uncontested primary election, may request an exemption. A candidate may request an exemption from the obligation to appoint a treasurer and file campaign finance reports if the candidate does not accept any cash or in-kind contributions or make any expenditures for their campaign. You cannot request a reporting exemption if you use your or your spouse's/domestic partner's personal funds to pay for your campaign expenses. To request an exemption, complete the statement below and sections 1 & 5, have the form notarized, and submit it to the Clerk's office. STATEMENT OF ELIGIBILITY FOR A REPORTING EXEMPTION: I, the undersigned, swear or affirm that I will not accept contributions, make expenditures or incur obligations associated with my candidacy. Signature of Candidate <u>Kerin McGowan</u> Date <u>8/26/25</u> Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____. Signature of Notary/Attorney-at-law _____ My commission expires _____ (Seal is optional) (Date) REVOCATION NOTICE: The foregoing statement may be revoked. Prior to revocation, the candidate must appoint a treasurer. A revocation notice must be in the form of an amended registration which must be filed with the Clerk's office no later than 10 days after the date the treasurer is appointed. The notice must be filed before contributions are accepted or expenditures made. A late revocation notice is subject to the same penalties applicable to late campaign finance reports.	

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Rec'd 10/21/25 epc

Emily Carrington, City Clerk
City of Auburn
60 Court Street, Auburn ME, 04210

Email: ecarrington@auburnmaine.gov
Phone: (207) 333-6600
Fax: (207) 333-6623

2025 Campaign Finance Report For Municipal Candidates

Name of Candidate:	Korin McGuigan		☐ Check if any information has changed from previous report
Street Address:	444 Turner St.		
City and ZIP:	Auburn 04210	Phone Number:	(207) 740-6258
Email:	kmcguigan@auburnschl.edu		
Office Sought:	School Committee Rep	District Number (if applicable):	Ward 1
Name of Treasurer:	James McGuigan		☐ Check if any information has changed from previous report
Mailing Address:	444 Turner St.		
City and ZIP:	Auburn 04210	Phone Number:	(207) 671-1092
Email:	jmcguigan@gmail.com		
Report Name	Filing Period	Filing Deadline	
☐ January Semiannual	07/01/2024 – 12/31/2024	01/15/2025	
☐ 11-Day Pre-June Election	If filing first report: Beginning of campaign – 05/27/2025 OR If January Semiannual filed: 01/01/2025 – 05/27/2025	05/30/2025	
☐ 42-Day Post-June Election	05/28/2025 – 07/15/2025	07/22/2025	
☐ July Semiannual	01/01/2025 – 06/30/2025	07/15/2025	
☒ 11-Day Pre-Nov. Election	If filing first report: Beginning of campaign – 10/21/2025 OR If 2025 July Semiannual filed: 07/01/2025 – 10/21/2025	10/24/2025	
☐ 42-Day Post-Nov. Election	10/22/2025 – 12/09/2025	12/16/2025	
☐ Amendment to:			
☐ Other (specify):			
☒ Check if campaign had not activity for the reporting period. (No other pages are required)			

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

Treasurer Signature

Date

Candidate Signature

Date

UNSWORN FALSIFICATION IS A CLASS D CRIME (17-A M.R.S. § 453).

