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2022 CAMPAIGN FINANCE REPORT

FOR ALL POLITICAL ACTION COMMITTEES AND BALLOT QUESTION COMMITTEES PARTICIPATING IN A MUNICIPAL ELECTION

Please complete ALL entr					
NAME OF COMMITTEE	One Fair Wage Po	ortland			
STREET	159 Central Aven	ue			☐ CHEC
CITY AND ZIP CODE	Peaks Island, ME	04108	TELEPHONE NUMBER	248-781-0655	CHANGEI FROM PREVIOUS REPOR
E-MAJL	unioncomic@gma	til.com			
NAME OF TREASURER	Mike Sylvester				
MAILING ADDRESS STREET	159 Central Aven	ue			CHECK
CITY AND ZIP CODE	Peaks Island, ME	04108	TELEPHONE NUMBER	207-239-1488	FROM PREVIOUS REPORT
E-MAIL	unioncomic@gma	iil,com		-	
Type of R	Report □	<u>Due Date</u>	D	ates of Report Per	od
Initial PAC Report		Seven (7) days after Registration	Start	of Year - date of regis	stration
☐ Initial BQC Report		Seven (7) days after Registration	Start of	Campaign – date of re	gistration
☐ April Quarterly Report	rt	April 11, 2022	Ji	anuary 1 – March 31, 2	022
☐ 11-Day Pre-June Rep	ort	June 3, 2022		April 1 - May 31, 202	2
☐ 42-Day Post-June Re	port	July 26, 2022		June 1 – July 19, 202	2
□ October Quarterly Re	port	October 5, 2022	Ju	ily 20 - September 30,	2022
X 11-Day Pre-November	Report	October 28, 2022	Oc	tober 1 – October 25,	2022
☐ 42-Day Post-November	er Report	December 20, 2022	Octo	ober 26 – December 13	3, 2022
☐ January Quarterly Re	port	January 17, 2023	Dece	mber 14 – December 3	11, 2022
☐ Amendment to:		,			
X No Activity Report: Us obligations during the re	se only if the committe	e had no contributions and no expenditu the appropriate report above as well.	res and did not i	ncur any unpaid debts	or
		ve no further activity. Check the appropr	iate report above	as well.	

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

Treasurer's or Principal Officer's Signature

10/28/2022

Date

Page 1_of 1 Schedule A only

SCHEDULE A CASH CONTRIBUTIONS

- · For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "Information requested" for the occupation and employer.
- For cash contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the
 appropriate key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list
 that contributor separately.
- Duplicate as needed.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT
October 3, 2022	One Fair Wage Action 45 Mt. Auburn Street Cambridge, ME 02138	N/A	10	\$50,000.00
		·		
	Total (combined totals from	cash contributions (this page o all Schedule A pages must be listed on Sc	nıy) ⇒ hedule F	\$0

Key Codes:

1 = Individuals

3 = Commercial Source

4 = Non-Profit Organization

5 = Political Action Committee

6 = Political Party Committee

7 = Ballot Question Committee

9 = Candidate/Candidate Committees

10 = General Treasury Transfer

12 = Contributors giving \$50 or Less

16 = Financial Institution

Page 1_of 1 Schedule A-1 only

SCHEDULE A-1 IN-KIND CONTRIBUTIONS

- In-kind contributions are goods and services (including facilities) that a committee received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the committee by others if the committee does not expect to reimburse the person who made the purchase.
- For contributors who gave more than \$50, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For contributions totaling \$50 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate
 key code on a line on this page. Once a contributor has given the committee more than \$50 in a report period, you must list that contributor
 separately.
- · Duplicate as needed.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	DESCRIPTION (of goods, services, facilities, or discounts received)	TYPE (use key code)	VALUE (estimated fair market value)
	·				
					A ATTACA
	(combined to		ntributions (this page only	ļ	\$0

Key Codes:

1 = Individuals

3 = Commercial Source

4 = Non-Profit Organization

5 = Political Action Committee

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7 = Ballot Question Committee

9 = Candidate/Candidate Committees

10 = General Treasury Transfer

12 = Contributors giving \$50 or Less

16 = Financial Institution

Page 1 of 2 Schedule B only

PAC/BQC Name: One Fair Wage Portland

SCHEDULE B EXPENDITURES TO SUPPORT OR OPPOSE

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

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

APP	Appare	el (t-shirts, hats, embroidery, etc.)	нто	Other and fees (bank, contribution, and mone	y order fees, etc.)
CON	Contrit	oution to party committee, non-profit, other	PER	Personnel and campaign staff, consulting, and	d independent contractors
EQP	Equipment of \$50 or more (computer, tablet, phone, furniture, etc.)		PHO	Phones (phone banking, robocalls, and texts)	
EVT	Campa supplie	ign and fundralsing events (venue/booth rental, entertainment,	POL	Polling and survey research	
FOD		or campaign events or volunteers, catering	POS	Postage for US Mall and mailbox fees	
HRD	Hardwi	are and small tools (hammer, nails, lumber, paint, etc.)	PRO	Professional services (graphic design, legal se	ervices, web design)
LIT	Printed	campaign materials (palmoards, signs, stickers, fiyers etc.)	RAD	Radio ads and production costs only	
MHS	Mail ho	ouse and direct mali (design, printing, mailing, and postage)	TKT	Enfrance cost to event (bean suppers, fairs, page 15)	arty events, etc.)
VEW	Newsp	aper 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 co	osts only
ONL	Social	medial and online advertising only	WEB	Website and internet costs (website domain ar	nd registration, etc.)
		/REMARKS:REQUIRED O	N ALL EXP	ENDITURE TYPESI	
•	pport pose	Daylight Communications, Inc. 96 County Road Ipswich, MA 01938-2525 Remarks (Required): Direct Mail, Printing, Graphic Design Candidate Name/Ballot Question: Portland Question D Payee Name and Address: Daylight Communications, Inc.			\$13,671.15 Amount
ype: HS		Daylight Communications, Inc. 96 County Road Ipswich, MA 01938-2525 Remarks (Required): Direct Mail, Printing, Graphic Design			\$15,719.61
Sur Opp	oport ose	Candidate Name/Ballot Question: Portland Question D			
		Total	eynen	ditures this page only ⇒	
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Page 2 of 2 Schedule B only

SCHEDULE B (continued) EXPENDITURES TO SUPPORT OR OPPOSE

Dat	e:	Payee Name and Address:	Amount
Тур	e:	Remarks (Required):	
"			
	Support	Candidate Name/Ballot Question:	
#	Oppose		
Dat	e;	Payee Name and Address:	Amount
Туг)e:	Remarks (Required):	
,			•
¥	Support	Candidate Name/Ballot Question:	
×	Oppose		
Dat	e:	Payee Name and Address:	Amount
Тур	le:	Remarks (Required):	
.,,,		(Coquiss)	
	Support	Candidate Name/Ballot Question:	
Ħ	Oppose		
Dat	e;	Payee Name and Address:	Amount
Тур	e:	Remarks (Required):	
.15			
×	Support	Candidate Name/Ballot Question:	
×	Oppose		
Date	e:	Payee Name and Address:	Amount
Тур	3'	Remarks (Required):	
ı yP'		romana (radanad)	
<u> </u>	Support	Candidate Name/Ballot Question:	
-	Oppose		
		Total expenditures this page only ⇒	
		(combined totals from all Schedule B pages must be listed on Schedule F)	\$ 0

SCHEDULE B - 1 OPERATING EXPENSES

List all operational expenditures made to a single payee or creditor that were made during this reporting period. Multiple expenditures
for bank fees and vehicle travel may be aggregated and listed as a lump sum provided that the time period of the expenditure be identified
in the remark section.

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a area se		EXPE	MDITU	JRE T	YPES	
APP	Appar	el (t-shirts, hats, embroídery, etc.)		ОТН	Other and fees (bank, contribution, and money order to	ees, etc.)
CON	Contri	bution to party committee, non-profit, other		PER	Personnel and campaign staff, consulting, and indepe	rident contractors
EQP	Equip	ment of \$50 or more (computer, tablet, phone, furniture, etc.)		PHO	Phones (phone banking, robocalis, and lexts)	
EVĨ		aign and fundraising events (venue/booth rental, entertainmer es, etc.)	nt,	POL	Polling and survey research	
FOD	Food	for campaign events or volunteers, catering		POS	Postage for US Mail and mailbox fees	
HRD	Hardv	vare and small tools (hammer, nalls, lumber, paint, etc.)		PRO	Professional services (graphic design, legal services,	web design)
LIT	Printe	d campalgn materials (palmcards, signs, stickers, flyers etc.)		RAD	Radio ads and production costs only	
MHS	Mailf	ouse and direct mail (design, printing, mailing, and postage)		ткт	Entrance cost to event (bean suppers, fairs, party even	nis, etc.)
NEW	News	paper 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	Socia	medial and online advertising only		WEB	Website and internet costs (website domain and regist	ration, etc.)
er i Fallen		I REMARKS REQUI	RED FOR	ALL EXP	ENDITURE TYPES I.	
DATE	•	PAYEE NAME & ADDRESS	TY	'PE	REMARKS (REQUIRED)	AMOUNT
			То	tal ex	 	
		(combined totals from		-	-1 pages must be listed on Schedule F)	\$0

SCHEDULE B – 1 (continued) OPERATING EXPENSES

DATE	PAYEE NAME & ADDRESS	TYPE	REMARKS (REQUIRED)	AMOUNT
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			and destructed the constitution of the destruction of the constitution of the constitu	
 				
			·	
				11
		Total exp	enditures (this page only) ⇒	
	(combined totals fro		pages must be listed on Schedule F)	\$0

SCHEDULE C LOANS AND REPAYMENTS

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

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
	LOAN BALANCE		ACTIVITY THIS PERIO eport amount and dat		LOAN BALANCE AT
LENDER'S NAME AND ADDRESS	AT BEGINNING OF PERIOD	AMOUNT LOANED THIS PERIOD	AMOUNT REPAID THIS PERIOD	AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also)	END OF PERIOD (1+2) - 3 - 4
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
	***	DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	V
		AMOUNT	AMOUNT	AMOUNT	
	and the second s	DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
·		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
	.	Enter on Schedule F, Line 3	Enter on Schedule F, Line 7		Enter on Schedule F, Line 14
Totals for each column ⇒		\$0	\$0	\$0	\$0

SCHEDULE D UNPAID DEBTS AND OBLIGATIONS

- A debt or obligation is incurred if a committee places an order for a good or service without making a payment; makes a promise or
 agreement to pay for a good or service; signs a contract for a good or service; or receives delivery of a good or service for which the
 committee has not paid.
- This schedule is a list of all unpaid debts and obligations of the committee as of the end of this reporting period. When the obligation has been paid, the expenditure (i.e., the actual payment) must be reported on Schedule B or B-1.
- If the committee has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- If obligations from a previous campaign finance report remain unpaid, you will need to continue to report them on this schedule until they have been paid in full.
- Duplicate as needed.

DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT
_			
The second secon			
		ts and obligations (this page only) ⇒ Schedule D pages must be listed on Schedule F)	\$0

SCHEDULE F SUMMARY SCHEDULE CASH ACTIVITY

Receipts	Total for this Period
Cash Contributions (Schedule A)	\$50,000.00
2. Other Cash Receipts (interest, etc.)	\$0
3. Loans (Schedule C)	\$0
4. Total Receipts (lines 1 + 2 + 3)	\$50,000.00
Expenditures	Total for this Period
5. Expenditures to Support or Oppose (Schedule B)	\$29,360.76
6. Operating Expenditures (Schedule B-1)	\$0
7. Loan Repayment (Schedule C)	\$0
8. Total Payments (lines 5 + 6 + 7)	\$29,360.76

CASH SUMMARY

	Total for This Period
9. Cash Balance at Beginning of Period	\$0
10. Plus Total Receipts This Period (line 4 above)	\$50,000.00
11. Minus Total Payments This Period (line 8 above)	\$29,360.76
12. Cash Balance at End of Period	\$20,639.24

OTHER ACTIVITY

	Total for This Period
13. In-Kind Contributions (Schedule A-1)	\$0
14. Total Loan Balance at End of Period (Schedule C)	\$0
15. Total Unpaid Debts at End of Period (Schedule D)	\$0