



FEDERAL ELECTION COMMISSION
WASHINGTON, D C 20463

THIS IS THE BEGINNING OF MUR # 3184

DATE FILMED 5/24/91 CAMERA NO. 4

CAMERA MAN AS

91040842395

REPORTS ANALYSIS REFERRAL

TO

OFFICE OF GENERAL COUNSEL

DATE: _____

ANALYST: Pat Sheppard

I. COMMITTEE:

Rolde for U.S. Senate Campaign
(C00239798)
Larry J. Kennedy, Treasurer
75 Market Street
P.O. Box 1179
Portland, ME 04104

II. RELEVANT STATUTE: 2 U.S.C. §434(a)(6)
11 CFR §104.5(f)

III. BACKGROUND:

Failure to File Forty-Eight Hour Notifications

The Rolde for U.S. Senate Campaign ("the Committee") had failed to file the required Forty-Eight (48) Hour Notifications ("48-Hour Notices") for two (2) contributions totaling \$63,000 received prior to the 1990 Primary Election.

The candidate was unopposed in the 1990 Primary Election held on June 12, 1990. Prior Notice was sent to the Committee on May 7, 1990 (Attachment 2). The Notice includes a section titled "Last Minute Contributions". This section reads "Committees must also file special notices on contributions of \$1,000 or more, received during the period May 24 through June 9, 1990. The notices must reach the appropriate federal and state offices within 48 hours of the committee's receipt."

Schedule A of the 1990 July Quarterly Report indicates that the Committee failed to file two (2) 48-Hour Notices for contributions received during the aforementioned reporting period (Attachment 3). The following is a list of the contributions for which no 48-Hour Notices were filed:

<u>Contributor Name</u>	<u>Date</u>	<u>Amount</u>
Neil R. Rolde (candidate)	5/30/90	\$61,000
Neil R. Rolde	6/08/90	\$ 2,000

91040842396

ROLDE FOR U.S. SENATE CAMPAIGN
REPORTS ANALYSIS OGC REFERRAL
PAGE 2

On August 7, 1990, a Request for Additional Information ("RFAI") was sent to the Committee (Attachment 4). The RFAI noted on an informational basis that the Committee may have failed to file one or more of the required 48-Hour Notices for "last minute" contributions of \$1,000 or more. The notice requested the Committee to review their procedures for checking contributions received during the aforementioned time period. In addition, the notice stated that although the Commission may take legal steps, any response would be taken into consideration.

On August 21, 1990, the Committee responded in a letter (Attachment 5). The treasurer stated that the notices had not been filed because the Committee was not aware of the policy. The treasurer stated that the problem had been corrected. The response also included one (1) of the omitted 48-Hour Notices.

IV. OTHER PENDING MATTERS INITIATED BY RAD:

None.

91040842397

DATE 13SEP90

GENERAL ELECTION COMMISSION
1989-1990
CANDIDATE INDEX OF SUPPORTING DOCUMENTS - (E)

PAGE 1

CANDIDATE/COMMITTEE/DOCUMENT	OFFICE SOUGHT/	PARTY	RECEIPTS		DISBURSEMENTS		COVERAGE DATES	# OF PAGES	MICROFILM LOCATION
			PRIMARY	GENERAL	PRIMARY	GENERAL			

TYPE OF FILER

ROLDE, NEIL	SENATE	DEMOCRATIC PARTY		MAINE	1990 ELECTION	ID# SOME00012
1. STATEMENT OF CANDIDATE						
1989 STATEMENT OF CANDIDATE					4DEC89	2 89SEN/010/0424
2. PRINCIPAL CAMPAIGN COMMITTEE						
ROLDE FOR US SENATE CAMPAIGN					ID #C00239798	SENATE
1989 STATEMENT OF ORGANIZATION					4DEC89	3 89SEN/010/0426
YEAR-END			31,337	8,315	1JUL89 -31DEC89	11 90SEN/006/0093
YEAR-END - AMENDMENT			31,337	8,315	1JUL89 -31DEC89	26 90SEN/009/0939
1990 STATEMENT OF ORGANIZATION - AMENDMENT					10JUL90	4 90SEN/010/2483
APRIL QUARTERLY			57,310	73,496	1JAN90 -31MAR90	35 90SEN/008/3567
APRIL QUARTERLY - AMENDMENT			57,360	80,125	1JAN90 -31MAR90	36 90SEN/009/0965
APRIL QUARTERLY - AMENDMENT			57,360	80,125	1JAN90 -31MAR90	21 90SEN/010/1593
APRIL QUARTERLY - AMENDMENT			57,360	80,125	1JAN90 -31MAR90	4 90SEN/014/0005
NOTICE OF FAILURE TO FILE					1JAN90 -31MAR90	1 90FEC/638/0888
REQUEST FOR ADDITIONAL INFORMATION					1JAN90 -31MAR90	1 90FEC/641/1209
REQUEST FOR ADDITIONAL INFORMATION 2ND					1JAN90 -31MAR90	2 90FEC/642/3059
PRE-PRIMARY			214,423	209,670	1APR90 -23MAY90	36 90SEN/010/0648
PRE-PRIMARY - AMENDMENT			-	-	1APR90 -23MAY90	3 90SEN/013/3355
PRE-PRIMARY - AMENDMENT			214,423	209,670	1APR90 -23MAY90	21 90SEN/014/0010
REQUEST FOR ADDITIONAL INFORMATION					1APR90 -23MAY90	2 90FEC/644/2990
REQUEST FOR ADDITIONAL INFORMATION 2ND					1APR90 -23MAY90	3 90FEC/651/0120
JULY QUARTERLY			153,557	149,441	24MAY90 -30JUN90	54 90SEN/010/2592
JULY QUARTERLY - AMENDMENT			153,557	149,441	24MAY90 -30JUN90	29 90SEN/014/0032
JULY QUARTERLY - AMENDMENT			-	-	24MAY90 -30JUN90	4 90SEN/014/4290
REQUEST FOR ADDITIONAL INFORMATION					24MAY90 -30JUN90	2 90FEC/651/3956
TOTAL			456,677	0 447,551	0	298 TOTAL PAGES
3. AUTHORIZED COMMITTEES						
4. JOINT FUNDRAISING COMMITTEES AUTHORIZED BY THE CAMPAIGN						

All Reports have been reviewed.

Cash-on-hand as of 6/30/90

\$ 9,126.79

Debts owed to Committee as of 6/30/90

0

Debts owed by Committee as of 6/30/90

79,201.78

91940842398

PRIMARY ELECTION REPORT NOTICE

FEDERAL ELECTION COMMISSION

MAINE

May 7, 1990

REPORT	REPORTING PERIOD1/	REG./CERT. MAILING DATE2/	FILING DATE
PRE-PRIMARY	04/01/90 - 05/23/90	05/28/90	05/31/90
JULY QUARTERLY	05/24/90 - 06/30/90	07/15/90	07/15/90

WHO MUST FILE

PRINCIPAL CAMPAIGN COMMITTEES OF CONGRESSIONAL "CANDIDATES" who seek nomination in the June 12, 1990, Maine Primary.

WHAT MUST BE REPORTED

All financial activity that occurred during the reporting period (or before, if not previously reported).

REPORTING FORMS

Candidate committees use Form 3 (enclosed). If the campaign has more than one authorized committee, the principal campaign committee must also file a consolidated report on Form 32.

WHERE TO FILE

Consult the instructions on the back of the Form 3 Summary Page. Note state filing requirements also.

LABEL

Committees should affix the peel-off label from the envelope to Line 1 of the report. Corrections should be made on the label.

LAST-MINUTE CONTRIBUTIONS

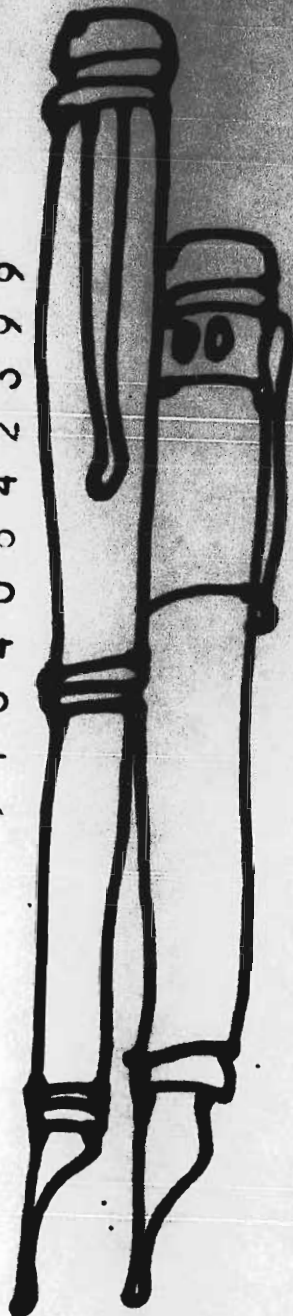
Committees must also file special notices on contributions of \$1,000 or more, received during the period May 24 through June 9, 1990. The notice must reach the appropriate federal and state offices within 48 hours of the committee's receipt.

1/The period begins with the close of the last report filed by the committee. If the committee has filed no previous reports, the period begins with the date of the committee's first activity.

2/The mailing date for the Primary report is a federal holiday, nevertheless, the report must be received by the filing date. Reports sent by registered or certified mail must be postmarked by the mailing date. Otherwise, they must be received by the filing date.

(over)

91040842399



MAINE

COMPLIANCE
TREASURERS OF POLITICAL COMMITTEES ARE RESPONSIBLE FOR FILING
ALL REPORTS ON TIME. FAILURE TO DO SO IS SUBJECT TO
ENFORCEMENT ACTION. COMMITTEES FILING ILLEGIBLE REPORTS OR
USING NON-PEC FORMS WILL BE REQUIRED TO REFILE.

91040842400

FOR INFORMATION, Call: 800/424-9530 or 202/376-3120

Attachment 3

FOR THE MONTH

110

Any information obtained from such Reports and Responses may not be sold or used by any person for the purpose of so-called "follow-up" or "cold calling" or for any other purpose, other than using the name and address of any political committee to solicit contributions from such committee.

Rolls for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Neil R. Rolde P.O. Box 304 York, NE 03909		U.S. Legislature	06/08/90	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$ 380000.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Neil R. Rolde P.O. Box 304 York, NE 03909		U.S. Legislature	06/13/90	45000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$ 380000.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Neil R. Rolde P.O. Box 304 York, NE 03909		U.S. Legislature	06/29/90	31000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$ 380000.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Neil R. Rolde P.O. Box 304 York, NE 03909		U.S. Legislature	05/30/90	61000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$ 380000.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	Aggregate Year-to-Date > \$	

SUBTOTAL of Revisions This Page (optional)

\$144,000.00

TOTAL This Period (last page)

\$144,000.00



FEDERAL ELECTION COMMISSION
WASHINGTON DC 20543

90-2

AD 7 000

Larry J. Kennedy, Treasurer
Holder for US Senate Campaign
75 Market Street
Portland, ME 04104

Identification Number: C00239798

Reference: July Quarterly Report (5/24/90-5/30/90)

Dear Mr. Kennedy:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report fails to supply certain information. Commission Regulations require the full name and mailing address of each creditor, the outstanding balance at the beginning and end of the reporting period, the amount incurred during this period, any payment made during this period, and the nature or purpose of each debt. All debts must be reported until extinguished or settled. Please amend your report to include the omitted information. (11 CFR §104.11)

-Schedule A of your report indicates that your committee may have failed to file one or more of the required 48 hour notices regarding "last minute" contributions received by your committee after the close of books for the 12 Day Pre-Primary report. A principal campaign committee must notify the Commission, in writing, within 48 hours of any contribution of \$1,000 or more received between two and twenty days before an election. These contributions are then reported on the next report required to be filed by the committee. To ensure that the Commission is notified of last minute contributions of \$1,000 or more to your campaign, it is recommended that you review your procedures for checking contributions received during the aforementioned time period. Although the Commission may take legal action, any response you wish to make concerning this matter will be taken into consideration. (11 CFR §104.5(f))

Sincerely,

Sincerely,
Pat Sheppard

Pat Sheppard
Senior Reports Analyst
Reports Analysis Division



NEIL ROLDE

DEMOCRAT FOR U.S. SENATE

August 16, 1990

Office of Public Records
Office of the Secretary of the Senate
232 Hart Senate Office Building
Washington, DC 20510-7116

Federal Election Commission
Attn: Pat Sheppard, Senior Reports Analyst
Reports Division
Washington, DC 20463

Identification Number: CO0239798

Reference: July Quarterly Report (5/24/90 - 6/30/90)

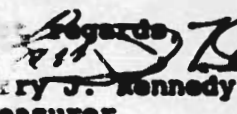
Dear Ms. Sheppard:

I am writing in response to your letter regarding the report referenced above.

The information that you requested regarding Schedule D was corrected with the submission of our amended Quarterly report, submitted to you on July 30, 1990.

Two 48 hour notices for "last minute" contributions, each greater than \$1,000.00 and received between two and twenty days before the primary election, were not filed due to the fact that we were unaware of this policy. The error was inadvertent on our behalf and we have taken the necessary steps to ensure that it does not reoccur. Please refer to the attached paperwork for the information on the two aforementioned contributions.

I regret any inconvenience to the commission and if you require further information please feel free to contact me at (207) 775-6345.

Respectfully,

Terry J. Kennedy
Treasurer

48 HOUR NOTIFICATION OF CONTRIBUTIONS

Name of Candidate Neil R. Rolde
Office Sought by Candidate U.S. Senate Candidate
Identification of Contributor Neil R. Rolde
P.O. Box 304
York, NE 68909
Date of Receipt May 30, 1990
Amount of Contribution \$61,000.00

PS

Name of Candidate Neil R. Rolde
Office Sought by Candidate U.S. Senate Candidate
Identification of Contributor UAW V CAP
PAC #C000002849
8000 E. Jefferson
Detroit, MI 48214
Date of Receipt June 12, 1990
Amount of Contribution \$2,000.00

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90020144291

RECEIVED

90 NOV 14 12:11:10

SENSITIVE

**FEDERAL ELECTION COMMISSION
999 E Street, N.W.
Washington, D.C. 20463**

FIRST GENERAL COUNSEL'S REPORT

**RAD Referral: 90L-43
STAFF MEMBER: Tamara Kapper**

SOURCE: INTERNALLY GENERATED

**RESPONDENTS: Rolde for U.S. Senate Campaign and Larry J.
Kennedy, as treasurer**

**RELEVANT STATUTES: 2 U.S.C. § 434(a)(6)
11 C.F.R. § 104.5(f)**

**INTERNAL REPORTS CHECKED: Disclosure Reports
Referral Material**

FEDERAL AGENCIES CHECKED: None

I. GENERATION OF MATTER

The Office of the General Counsel received a referral from the Reports Analysis Division on September 18, 1990.

Attachment 1. The basis of the attached referral is the failure of Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer (the "Committee"), to timely file two (2) forty-eight hour notifications ("48 Hour Notices") for contributions totaling \$63,000. The candidate, Neil Rolde, ran unopposed in the June 12, 1990 Primary Election for the U.S. Senate from the state of Maine.

II. FACTUAL AND LEGAL ANALYSIS

For the Factual and Legal Analysis, see Attachment 2.

III. DISCUSSION OF CONCILIATION AND CIVIL PENALTY

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IV. RECOMMENDATIONS


1. Open a MUR.
2. Find reason to believe that the Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer violated 2 U.S.C. § 434(a)(6).
3. Approve the attached Factual and Legal Analysis and Proposed Conciliation Agreement.
4. Approve the appropriate letter.

Lawrence M. Noble
General Counsel

Date

11/13/90

BY:


Lois G. Lerner
Associate General Counsel

Attachments:

1. Referral Materials
2. Factual and Legal Analysis
3. Proposed Conciliation Agreement



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20461

MEMORANDUM

TO: LAWRENCE M. NOBLE
GENERAL COUNSEL

FROM: MARJORIE W. EMMONS/DELORES HARRIS *OK*
COMMISSION SECRETARY

DATE: NOVEMBER 19, 1990

SUBJECT: RAD REFERRAL 90L-43 - FIRST GENERAL COUNSEL'S
REPORT DATED NOVEMBER 13,
1990.

The above-captioned document was circulated to the
Commission on Wed., Nov. 14, 1990 at 4:00 p.m..

Objection(s) have been received from the Commissioner(s)
as indicated by the name(s) checked below:

Commissioner Aikens	<u>XXX</u>
Commissioner Elliott	<u> </u>
Commissioner Josefiak	<u> </u>
Commissioner McDonald	<u> </u>
Commissioner McGarry	<u> </u>
Commissioner Thomas	<u> </u>

This matter will be placed on the meeting agenda
for TUESDAY, NOVEMBER 27, 1990.

Please notify us who will represent your Division before the
Commission on this matter.

91040842408

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of

Rolde for U.S. Senate Campaign and
Larry J. Kennedy, as treasurer.

)
) RAD Referral
) #90L-43
)

(MUR 3184)

CERTIFICATION

I, Marjorie W. Emmons, recording secretary for the
Federal Election Commission executive session on
November 27, 1990, do hereby certify that the Commission
decided by a vote of 5-1 to take the following actions
with respect to RAD Referral 90-43:

1. Open a MUR.
2. Find reason to believe that the Rolde for
U.S. Senate Campaign and Larry J. Kennedy,
as treasurer, violated 2 U.S.C. § 434(a)(6).
3. Approve the Factual and Legal Analysis and
Proposed Conciliation Agreement attached to
the General Counsel's report dated
November 13, 1990.
4. Approve the appropriate letter as recommended
in the General Counsel's report dated
November 13, 1990.

Commissioners Elliott, Josefiak, McDonald, McGarry, and
Thomas voted affirmatively for the decision. Commissioner
Aikens dissented.

Attest:

11-28-90
Date

Marjorie W. Emmons
Marjorie W. Emmons
Secretary of the Commission

91040842409



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

December 5, 1990

Larry J. Kennedy, Treasurer
Rolde for U.S. Senate Campaign
75 Market Street
P.O. Box 1179
Portland, ME 04104

RE: MUR 3184
Rolde for U.S. Senate
Campaign and Larry J.
Kennedy, as treasurer

Dear Mr. Kennedy:

On November 27, 1990, the Federal Election Commission found that there is reason to believe that Rolde for U.S. Senate ("Committee") and you, as treasurer, violated 2 U.S.C. § 434(a)(6), a provision of the Federal Election Campaign Act of 1971, as amended ("the Act"). The Factual and Legal Analysis, which formed a basis for the Commission's finding, is attached for your information.

Under the Act, you have an opportunity to demonstrate that no action should be taken against the Committee and you, as treasurer. You may submit any factual or legal materials that you believe are relevant to the Commission's consideration of this matter. Please submit such materials to the General Counsel's Office within 15 days of your receipt of this letter. Where appropriate, statements should be submitted under oath.

In the absence of any additional information demonstrating that no further action should be taken against the Committee and you, as treasurer, the Commission may find probable cause to believe that a violation has occurred and proceed with conciliation.

In order to expedite the resolution of this matter, the Commission has also decided to offer to enter into negotiations directed towards reaching a conciliation agreement in settlement of this matter prior to a finding of probable cause to believe. Enclosed is a conciliation agreement that the Commission has approved.

91040842410

Larry J. Kennedy
Page 2

If you are interested in expediting the resolution of this matter by pursuing preprobable cause conciliation and if you agree with the provisions of the enclosed agreement, please sign and return the agreement, along with the civil penalty, to the Commission. In light of the fact that conciliation negotiations, prior to a finding of probable cause to believe, are limited to a maximum of 30 days, you should respond to this notification as soon as possible.


Requests for extensions of time will not be routinely granted. Requests must be made in writing at least five days prior to the due date of the response and specific good cause must be demonstrated. In addition, the Office of the General Counsel ordinarily will not give extensions beyond 20 days.

If you intend to be represented by counsel in this matter, please advise the Commission by completing the enclosed form stating the name, address, and telephone number of such counsel, and authorizing such counsel to receive any notifications and other communications from the Commission.

This matter will remain confidential in accordance with 2 U.S.C. §§ 437g(a)(4)(B) and 437g(a)(12)(A), unless you notify the Commission in writing that you wish the investigation to be made public.

For your information, we have attached a brief description of the Commission's procedures for handling possible violations of the Act. If you have any questions, please contact Tamara Kapper, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,


Lee Ann Elliott
Chairman

Enclosures
Factual and Legal Analysis
Procedures
Designation of Counsel Form
Conciliation Agreement

91040842411

FEDERAL ELECTION COMMISSION

FACTUAL AND LEGAL ANALYSIS

RESPONDENTS: Rolde for U.S. Senate Campaign **MUR:** 3184
and Larry J. Kennedy, as
treasurer

SUMMARY OF ALLEGATIONS

It is alleged that the Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer (the "Committee") failed to timely file two (2) forty-eight hour notifications ("48 Hour Notices") for contributions totaling \$63,000.

FACTUAL AND LEGAL ANALYSIS

The Federal Election Campaign Act of 1971, as amended (the "Act"), requires principal campaign committees of candidates for federal office to notify either the Secretary of the Senate, the Clerk of the U.S. House of Representatives or the Commission, as appropriate, and the Secretary of the State, in writing, of each contribution totaling \$1,000 or more received by any authorized committee of the candidate after the 20th day but more than 48 hours before any election. 2 U.S.C. § 434(a)(6)(A). The Act further requires this notification to be made within 48 hours after the receipt of the contribution and to include the name of the candidate and office sought by the candidate, identification of the contributor, the date of receipt and the amount of the contribution. Id. The notification of these contributions shall be in addition to all other reporting requirements. 2 U.S.C. § 434(a)(6)(B).

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Mr. Rolde was a candidate for the U.S. Senate from the state of Maine in the June 12, 1990 Primary Election. According to its Statement of Organization filed with the Commission, Rolde for U.S. Senate Campaign is the authorized principal campaign committee of Neil Rolde. Larry J. Kennedy is the treasurer of Rolde for U.S. Senate Campaign.

The Primary Election in the state of Maine was held on June 12, 1990. Pursuant to 2 U.S.C. § 434(a)(6)(A) the Committee was required to notify the Commission, in writing, of all contributions of \$1,000 or more received from May 24, 1990 to June 9, 1990 within 48 hours of their receipt.

On May 7, 1990 the Committee was reminded by the Commission, in writing, that the receipt of contributions of \$1,000 or more must be reported within 48 hours if received during the period of May 24, 1990 through June 9, 1990. The notice further stated that these notifications must reach the appropriate federal and state offices within 48 hours of the committee's receipt.

The Committee received two (2) contributions during the period prior to the Primary Election that required written notification to the Commission. The contributions received were as follows:

<u>Name of Contributor</u>	<u>Date of Receipt</u>	<u>Amount</u>
Neil R. Rolde (candidate)	5/30/90	\$61,000
Neil R. Rolde	6/08/90	<u>2,000</u>
	Total	\$63,000

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Neither of these contributions were reported to the Commission until the Committee filed its 1990 July Quarterly Report, which was not received by the Commission until July 12, 1990.

It thus appears that the Committee may have violated 2 U.S.C. § 434(a)(6) by failing to disclose two (2) contributions of \$1,000 or more before a primary election within 48 hours of their receipt. Therefore, there is reason to believe that Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer, violated 2 U.S.C. § 434(a)(6).

91040842414

PRETI, FLAHERTY, BELIVEAU & T

ATTORNEYS AT LAW

443 CONGRESS STREET
PORTLAND, MAINE 04101-3590

(207) 775-5831

TELEFAX (207) 775-5494

90 DEC 24 AM 10: 02

AUGUSTA OFFICE:
45 MEMORIAL CIRCLE
P.O. BOX 1058
AUGUSTA, MAINE 04332-1058
(207) 623-5167
TELEFAX (207) 623-2914

RUMFORD OFFICE:
150 CONGRESS STREET
P.O. DRAWER L
RUMFORD, MAINE 04276-2035
(207) 364-4593
TELEFAX (207) 360-9421

JOHN J. FLAHERTY
ALBERT J. BELIVEAU, JR.
SEVERIN M. BELIVEAU
HAROLD C. PACHOS
MICHAEL J. GENTILE
RICHARD H. SPENCER, JR.
KEITH A. POWERS
CHRISTOPHER D. NYHAN
ERIC P. STAUFFER
JONATHAN S. PIPER
DANIEL RAPAPORT

OF COUNSEL:

ROBERT F. PRETI
ROBERT W. SMITH

JOHN P. DOYLE, JR.
BRUCE C. GERRITY
ANTHONY W. BUXTON
JEFFREY T. EDWARDS
ROBERT CHECKOWAY
MICHAEL G. MESSERSCHMIDT
RANDALL B. WEILL
JAMES C. PITNEY, JR.
EVAN M. HANSEN
VIRGINIA E. DAVIS

ESTELLE A. LAVOIE
GEOFFREY K. CLUMMINGS
EDWARD R. BENJAMIN, JR.
MICHAEL L. SHEEHAN
JOY C. CANTRELL
SUSAN E. LOGUDICE
JEFFREY R. BURNS
NELSON J. LARKINS
MICHAEL KAPLAN
LEONARD M. GULINO
STEPHEN E. F. LANGSDORF
JAMES E. PHIPPS
JEANNE T. COHN

JOHN P. McVEIGH
MARILYN E. MISTRETTE
ELIZABETH A. OLIVIER
CRAIG T. BELING
DAVID L. GALGAY, JR.
ANN R. ROBINSON
SUSAN H. LIVINGSTON
DEIRDRE M. O'CALLAGHAN
JOSEPH G. DONAHUE
CLAUDIA D. RAESSLER
PAUL C. CATSOS
JILL M. P. ALLEN
SUSAN E. KELLEY

RECEIVED
FEDERAL ELECTION COMMISSION
OFFICE OF GENERAL COUNSEL
90 DEC 26 PM 12: 20

December 21, 1990

VIA FEDERAL EXPRESS

Tamara Kapper, Esq.
Office of General Counsel
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: In the Matter of Rolde For U.S. Senate Campaign and
Larry J. Kennedy, Treasurer - NUR 3184

Dear Tamara:

On behalf of the Rolde for U.S. Senate Campaign and Larry J. Kennedy, Treasurer, I enclose herewith the Respondents' Reply and accompanying Affidavit of Larry J. Kennedy.

These documents are submitted in pursuit of a conciliation agreement prior to a finding of probable cause by the Commission.

Please let me know if I can answer further questions.

Very truly yours,

Estelle Lavoie

Estelle A. Lavoie

EAL/mb
Enclosures

cc: Neil R. Rolde (w/enc.)
Barbara Holt (w/enc.)
Larry J. Kennedy (w/enc.)

EAL/78306.AB0

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of
Rolde for U.S. Senate
Campaign and Larry J.
Kennedy, Treasurer,
Respondents
MUR 3184

RESPONDENTS' REPLY

NOW COME Respondents, Rolde for U.S. Senate Campaign and Larry J. Kennedy, as Treasurer, by and through their undersigned counsel, and reply to the allegations made by the Federal Election Commission.

STATEMENT OF FACTS

On November 27, 1990, the Federal Election Commission (the "Commission") found that there was reason to believe that Rolde for U.S. Senate (the "Committee") and Larry J. Kennedy, as Treasurer of the Committee ("Kennedy"), violated 2 U.S.C. §434(a)(6), a provision of the Federal Election Campaign Act (the "Act") by failing to file two (2) forty-eight hour notifications ("48 Hour Notices") for contributions totaling \$63,000.

Neil R. Rolde was a candidate for U.S. Senate for the State of Maine in 1990 and an unopposed candidate in the Democratic primary on June 12, 1990. On May 30, 1990, Rolde made a personal contribution to his campaign of \$61,000 and on June 8, he made another contribution of \$2,000. The receipts were duly

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noted by the Committee, but Kennedy was unaware of the 48 hour rule codified at 2 U.S.C. §434(a)(6) requiring that a contribution of \$1,000 or more received by an authorized committee after the 20th day but more than 48 hours before an election be reported within 48 hours of receipt (the "48 hour rule"). See Kennedy Affidavit. The Committee had no record of receiving a writing or notice from the Commission on or about May 7, 1990 reminding it of the 48 hour rule. Accordingly, the contributions of the candidate were reported to the Commission and other appropriate parties on the July 15th Quarterly Report, Schedule A, for line 11d. See Exhibit A.

On August 10, 1990, Kennedy received a letter from the Commission, see Exhibit B, informing him of two concerns, one relating to a potential violation of the 48 hour rule. Kennedy responded six days later, by letter of August 16, 1990, see Exhibit C, advising that the two last-minute contributions referred to were not filed within 48 hours of receipt because he was unaware of the rule. He attached information on the contributions¹ and assured the Commission that corrective steps were being taken so that the problem would not reoccur.

Two last-minute contributions were received prior to the November 6th general election and were timely reported in

¹/ The 48 Hour Notification of Contributions attached to Kennedy's August 16th letter should have listed the contributor of the \$2,000 contribution as Neil R. Rolde and the date of receipt as June 8, 1990 - as was correctly stated on the July 15th Quarterly Report.

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accordance with the 48 hour rule by letters dated October 25, 1990 and October 29, 1990. See Exhibits D and E.

Rolde lost in his bid for election to the U.S. Senate and has substantially wound down the campaign.

Believing that he and the Committee had properly complied with the Act, Kennedy received the Commission's December 5th letter on December 11, 1990, again alleging that the 48 hour rule had been violated.

ARGUMENT

THE PROPOSED PENALTY IS A HARSH RESULT AND SHOULD NOT BE ASSESSED.

Neil R. Rolde has been a member of the Maine Legislature for 8 terms, or 16 years, and made his first run for federal office in his 1990 campaign for U.S. Senate against incumbent Senator William S. Cohen. He assembled campaign staff who sought training on Commission rules and endeavored to comply with all rules in a prompt and punctilious manner. When the Committee discovered errors on its July 15th Quarterly Report, errors due to a faulty computer program and clerical mistake, the Committee corrected them immediately through its Amended Quarterly Report prepared on July 30, 1990. See Exhibit F, cover letter to Amended Quarterly Report. When Kennedy received the Commission's letter of August 7, 1990, with notification of the 48 hour rule, he not only corrected the information at that time but he ensured that the rule was complied with for the general election.

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1. The 1990 race for U.S. Senate in Maine is the first federal campaign in which Neil Rolde has run. It is entirely understandable that a first-time candidate with an inexperienced staff would run afoul of one of the Commission's many rules and statutory provisions. In this case, the failure to report two of the candidate's contributions within 48 hours of receipt was inadvertent and not done with any intention of evading Commission rules.
 2. The Committee responded promptly to the Commission's notification of the problem in August and not only corrected the problem related to the June 12th primary election but ensured that it did not reoccur for the November 6th general election. In all other ways, the Committee demonstrated compliance with Commission rules or prompt correction of minor problems discovered. At all times, the Treasurer used his best efforts to maintain that compliance.
 3. The public purpose of disclosure which the Act is meant to serve was met in this instance because the contributions at issue - on May 30, 1990 and June 8, 1990 - were disclosed on the July 15th Quarterly Report, well in advance of the general election. Moreover, Rolde was unopposed in the primary election and did not and could not gain any political advantage by failing to disclose them more promptly. Also, the fact that he was going to use a substantial amount of personal funds for the campaign was made public by the candidate at the start of the campaign and repeated in numerous press articles.

PRAYER FOR RELIEF

Accordingly, the Committee and Kennedy urge that the Commission not impose a civil penalty for this inadvertent and unintentional error. The Act at 2 U.S.C. §437(a)(5)(A) states that a conciliation agreement "may" include civil penalties. Thus, such penalties are not required by law and are at the discretion of the Commission. Moreover, any report of a committee whose treasurer uses best efforts to obtain, maintain,

and submit the information required by the Act shall be considered in compliance. 2 U.S.C. §432(i); 11 C.F.R. §104.7(a).

We would be pleased to respond if the Commission has any questions.

Dated at Portland, Maine this 21st day of December, 1990.

Estelle A. Lavoie
Estelle A. Lavoie
Attorney for Respondents
Rolds for U.S. Senate
Campaign and Larry J.
Kennedy as Treasurer

Estelle A. Lavoie, Esq.
Preti, Flaherty, Beliveau
and Pachios
443 Congress Street
Portland, Maine 04101
(207) 775-5831

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5. I do not have any record of receiving a writing or notice from the Federal Election Commission (the "Commission") on or about May 7, 1990 informing or reminding me of the rule requiring that contributions exceeding \$1,000 received by the Committee after the 20th day but more than 48 hours before an election must be reported within 48 hours of receipt (the "48 hour rule").

6. At the time that Neil Rolde made contributions to the Committee from his personal funds on May 30 and June 8, 1990, I was completely unaware of the 48 hour rule.

7. On August 10, 1990, when I received the Commission's letter of August 7, 1990, I sought to correct the omission in reporting immediately and to ensure that the problem did not reoccur. In fact, the Committee reported two last minute contributions before the general election on October 25 and October 29, 1990.

8. On December 11, 1990, the Committee received the Commission's letter of December 5, 1990, regarding the alleged violation of the 48 hour rule which I believed had been attended to and corrected.

9. During my tenure as Treasurer of the Committee, I have always made the best effort possible to comply with the Act and provide all information required.

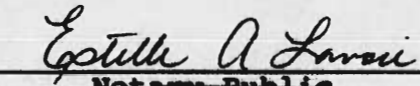
DATED: December 21, 1990


Larry J. Kennedy

STATE OF MAINE
CUMBERLAND, ss.

December 21, 1990

Personally appeared before me the above-named Larry J. Kennedy, individually and in his capacity as Treasurer of the Rolde for U.S. Senate Campaign, and swore that the above statements were true to the best of his personal knowledge.


Notary Public
Attorney at Law

STATEMENT OF DESIGNATION OF COUNSEL

NUR 3184

NAME OF COUNSEL: Ms. Estelle LA VOIE

ADDRESS:

Preti, Flaherty Beliveau + Achios
443 Congress Street
Portland, Me 04101-3590

TELEPHONE: 207-775-5831

The above-named individual is hereby designated as my
counsel and is authorized to receive any notifications and other
communications from the Commission and to act on my behalf before
the Commission.

12/12/90
Date

Sam J. [Signature]
Signature Treasurer

RESPONDENT'S NAME: Barbara S. Holt, Campaign Director

ADDRESS:

C/o Rolde for U.S. Senate
Box 1179
Portland, ME 04002

HOME PHONE: 207-324-0004

BUSINESS PHONE: SAME

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REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

EXHIBIT A
original
report

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ROLDE FOR U. S. SENATE CAMPAIGN		2. FEC IDENTIFICATION NUMBER C00239798
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P. O. BOX 1179		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE PORTLAND, ME 04101	STATE/DISTRICT MAINE	

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input checked="" type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for: ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period <u>05/31/90</u> through <u>06/30/90</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	153,307.30	424,816.30
(b) Total Contribution Refunds (from Line 30(d))	0.00	2,000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	153,307.30	422,816.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	149,441.10	437,237.00
(b) Total Offsets to Operating Expenditures (from Line 14)	195.50	207.50
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	149,245.60	437,029.50
8. Cash on Hand at Close of Reporting Period (from Line 27)	9,126.79	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-378-3120
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	73,732.80	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: **Larry J. Kennedy**

Signature of Treasurer: *Larry J. Kennedy* Date: **7/10/90**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full)

Rolda for U. S. Senate Campaign C00239798

Report Covering the Period

From 05/24/90

To 06/30/90

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees				11(a)
(i) Itemized (use Schedule A)		2,210.00		11(a)(i)
(ii) Unitemized		4,975.30		11(a)(ii)
(iii) Total of contributions from individuals		7,185.30	25,869.30	11(a)(iii)
(b) Political Party Committees		0.00	0.00	11(b)
(c) Other Political Committees (such as PACs)		2,122.00	18,947.00	11(c)
(d) The Candidate		144,000.00	380,000.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		153,307.30	424,816.30	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00	12
13. LOANS:				
(a) Made or Guaranteed by the Candidate		0.00	0.00	13(a)
(b) All Other Loans		0.00	0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b))		0.00	0.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		195.50	207.50	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)		54.39	317.94	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		153,557.19	425,341.74	16
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES		149,441.10	437,237.00	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00	18
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate		0.00	0.00	19(a)
(b) Of All Other Loans		0.00	0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		0.00	0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees		0.00	1,000.00	20(a)
(b) Political Party Committees		0.00	0.00	20(b)
(c) Other Political Committees (such as PACs)		0.00	1,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		0.00	2,000.00	20(d)
21. OTHER DISBURSEMENTS		0.00	0.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		149,441.10	439,237.00	22
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$	5,010.70	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$	153,557.19	24
25. SUBTOTAL (add Line 23 and Line 24)		\$	158,567.89	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$	149,441.10	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$	9,126.79	27

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Any information copied from such Reports and Statements may not be sold or used by any person for any purpose other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

<p>A. Full Name, Mailing Address and ZIP Code J. Frank Gerrity c/o Gerrity Co., Inc. P.O. Box 1100 Newton Upper Falls, MA 02164</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Gerrity Co., Inc.</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 06/21/90</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Suzanne F. Hedrick 11 Coughlin Street Augusta, ME 04330</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Volunteer Worker</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 06/21/90</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Barry J. Hobbins 74 Beach St. Saco, ME 04072</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 06/22/90</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jon D. Levy 231 RTE 91 PO Box 528 York, ME 03909</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jon D. Levy Law Offices</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 05/31/90</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Marc V. Schnur P.O. Box 216 Islesboro, ME 04848</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Management Consult.</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 06/19/90</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Albert J. Theriault 67 Spruce Street Rumford, ME 04276</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 06/21/90</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>G. Full Name, Mailing Address and ZIP Code William M. Trask 158 Eastern Ave. Brewer, ME 04412</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer James River Corp.</p> <p>Occupation Personnel Mngr.</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 06/21/90</p>	<p>Amount of Each Receipt this Period 220.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1,970.00

TOTAL This Period (last page this line number only)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Harry E. Triplett P.O. Box 716 Bar Harbor, ME 04609	Name of Employer n/a Occupation Retired	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 220.00		
B. Full Name, Mailing Address and ZIP Code Michael D. Wormser Route 2 - Box 5490 Union, ME 04862	Name of Employer Self-Employed Occupation Writer	Date (month, day, year) 06/22/90	Amount of Each Receipt this Period 220.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 220.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$240.00
TOTAL This Period (last page this line number only)	\$2,210.00

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Any information copied from such Receipts and Subtotals may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Neil R. Rolde P.O. Box 304 York, ME 03909	Name of Employer U.S. Legislature	Date (month, day, year) 06/08/90	Amount of Each Receipt this Period 2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	
Aggregate Year-to-Date > \$ 380000.00			
B. Full Name, Mailing Address and ZIP Code Neil R. Rolde P.O. Box 304 York, ME 03909	Name of Employer U.S. Legislature	Date (month, day, year) 06/13/90	Amount of Each Receipt this Period 45000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	
Aggregate Year-to-Date > \$ 380000.00			
C. Full Name, Mailing Address and ZIP Code Neil R. Rolde P.O. Box 304 York, ME 03909	Name of Employer U.S. Legislature	Date (month, day, year) 06/29/90	Amount of Each Receipt this Period 36000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	
Aggregate Year-to-Date > \$ 380000.00			
D. Full Name, Mailing Address and ZIP Code Neil R. Rolde P.O. Box 304 York, ME 03909	Name of Employer U.S. Legislature	Date (month, day, year) 05/30/90	Amount of Each Receipt this Period 61000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Candidate	
Aggregate Year-to-Date > \$ 380000.00			
E. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation 	
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation 	
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation 	
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) \$144,000.00

TOTAL This Period (last page this line number only) \$144,000.00

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NEIL ROLDE

DEMOCRAT FOR U.S. SENATE

VOLUNTARY INDIVIDUAL CONTRIBUTION DISCLOSURE

The following information regarding individual contributions made to the Rolde for U.S. Senate Campaign during the period of 5/24/90 - 6/30/90 for individual contributions under \$200.00, is provided voluntarily in an effort to provide a thorough analysis of this reporting period.

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VOLUNTARY DISCLOSURE - UNIDENTIFIED INDIVIDUALS

Any information copied from such Records and Disclosures may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Mitchell & Mitchell P.O. Box 2190 Bangor, ME 04401	Name of Employer n/a Occupation	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 35.00	
B. Full Name, Mailing Address and ZIP Code Herbert C. Adams 65 Sherman St., Apt. 16 Portland, ME 04101	Name of Employer n/a Occupation	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 35.00	
C. Full Name, Mailing Address and ZIP Code Richard Anderson 27 Flying Pt. Rd. Freeport, ME 04032	Name of Employer n/a Occupation Consultant	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 25.00	
D. Full Name, Mailing Address and ZIP Code Bonnie B. Anderson 451 Blackstrap Road Falmouth, ME 04105	Name of Employer n/a Occupation	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 25.00	
E. Full Name, Mailing Address and ZIP Code Flora C. Arnold RD 1, Box 1110 Jefferson, ME 04348	Name of Employer n/a Occupation	Date (month, day, year) 06/26/90	Amount of Each Receipt this Period 5.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 15.00	
F. Full Name, Mailing Address and ZIP Code Peter K. Baldacci 128 Maple Street Bangor, ME 04401	Name of Employer n/a Occupation	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 20.00	
G. Full Name, Mailing Address and ZIP Code Maria S. Barth PO Box 137, Pepperrell Rd Kittery Point, ME 03905	Name of Employer n/a Occupation	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 35.00	

SUBTOTAL of Receipts This Page (optional) \$180.00

TOTAL This Period (last page this line number only)

91040842430

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule
for each category of the
Schedule Summary Page

 2 24
FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information covered from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Lillian M. Bartlett PO Box 2549 Kennebunkport, ME 04046 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$ 80.00	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 30.00
B. Full Name, Mailing Address and ZIP Code Frederick D. Barton 127 Neal Street Portland, ME 04102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 50.00
C. Full Name, Mailing Address and ZIP Code William Chester Basford 45 Benton Avenue Benton Station Fairfield, ME 04937 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Engineer Aggregate Year-to-Date > \$ 25.00	Date (month, day, year) 06/07/90	Amount of Each Receipt this Period 25.00
D. Full Name, Mailing Address and ZIP Code Samuel L. Beder Two Lights Rd. R.R. 5, Box 84 Cape Elizabeth, ME 04107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$ 45.00	Date (month, day, year) 06/02/90	Amount of Each Receipt this Period 25.00
E. Full Name, Mailing Address and ZIP Code Samuel L. Beder Two Lights Rd. R.R. 5, Box 84 Cape Elizabeth, ME 04107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$ 45.00	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 20.00
F. Full Name, Mailing Address and ZIP Code Sheila Bellefleur 36 Seaview Ave. Old Orchard Beach, ME 04064 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$ 10.00	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
G. Full Name, Mailing Address and ZIP Code Doug Bennett PO Box 2611 Augusta, ME 04330 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)

\$190.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the period Summary Page

FOR LINE NUMBER
1111

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code John R. Benoit 121 Grant Street Bangor, ME 04401	Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 20.00	
B. Full Name, Mailing Address and ZIP Code Jim Betts P.O. Box 363 Yarmouth, ME 04096	Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 35.00	
C. Full Name, Mailing Address and ZIP Code Gloria H. Bishop 8 Bramhall Place Portland, ME 04103	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 10.00	
D. Full Name, Mailing Address and ZIP Code Ellis K. Bliss 40 Bay Road South Portland, ME 04106	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 20.00	
E. Full Name, Mailing Address and ZIP Code Sarah B. Bragdon 63 Parkview Ave. Bangor, ME 04401	Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 25.00	
F. Full Name, Mailing Address and ZIP Code Sarah B. Bragdon 63 Parkview Ave. Bangor, ME 04401	Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 25.00	
G. Full Name, Mailing Address and ZIP Code Joan L. Braun P.O. Box 84 Weld, ME 04285	Name of Employer n/a	Date (month, day, year) 05/30/90	Amount of Each Receipt this Period 5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5.00	

SUBTOTAL of Receipts This Page (optional)

\$115.00

TOTAL This Period (last page this line number only)

91040842432

ITEMIZED RECEIPTS

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUAL

11211

Rolde for U. S. Senate C00239798

21-0-40-3-4-2-4-33

\$430.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 AND REPORT TO THE SECRETARY OF THE
 FOR EACH CATEGORY OF THE
 AND SUMMARY PAGE

FOR LINE NUMBER

VOLUNTARY DISCLOSURE BY UNITEMIZED INDIVIDUALS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Michael P. Cantara 41 Birch St. #408 Biddeford, ME 04005	Name of Employer n/a	Date (month, day, year) 06/08/90	Amount of Each Receipt this Period 12.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 12.00		
B. Full Name, Mailing Address and ZIP Code Jonathan L. Carter Box 41, Sparhawk Lane Kittery Point, ME 03905	Name of Employer Wells	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Wells Town Manager Aggregate Year-to-Date > \$ 20.00		
C. Full Name, Mailing Address and ZIP Code Francis J. Christian 6 Eureka Ave. York, ME 03909	Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 30.00		
D. Full Name, Mailing Address and ZIP Code Francis J. Christian 6 Eureka Ave. York, ME 03909	Name of Employer n/a	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 30.00		
E. Full Name, Mailing Address and ZIP Code Margaret Pruitt Clark 5 Quarry Road Brunswick, ME 04011	Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 50.00		
F. Full Name, Mailing Address and ZIP Code Betty Cole 60 Andrea St. Topsham, ME 04086	Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 50.00		
G. Full Name, Mailing Address and ZIP Code Kelly T. Currie 5349 Taney Ave., Apt. 201 Alexandria, VA 22304	Name of Employer n/a	Date (month, day, year) 06/03/90	Amount of Each Receipt this Period 17.50
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 17.50		

SUBTOTAL of Receipts This Page (optional)

\$179.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the listed Summary Page

6 24
FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11a11

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Douglas S. Damrosch P.O. Box 323 Blue Hill, ME 04614		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code Eleanor Diamond 199 Howard Street Bangor, ME 04401		Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 40.00	
C. Full Name, Mailing Address and ZIP Code Martie Dickson P.O. Box 7 Deer Isle, ME 04627		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
D. Full Name, Mailing Address and ZIP Code John Dorrer 101 Royal Rd. Bangor, ME 04401		Name of Employer n/a	Date (month, day, year) 06/12/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
E. Full Name, Mailing Address and ZIP Code Andrew J. Doukas P.O. Box 4185 673 Congress Street Portland, ME 04101		Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 30.00	
F. Full Name, Mailing Address and ZIP Code Sean Faircloth 122 Maple Street Bangor, ME 04401		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 33.80 in-kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 33.80	
G. Full Name, Mailing Address and ZIP Code Amy L. Faircloth 122 Maple Street Bangor, ME 04401		Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	

SUBTOTAL of Receipts This Page (optional)

\$133.80

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 USE SEPARATE SCHEDULES
 for each category of the
 United Summary Page

 7 24
 FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11811

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code David J. Faulkner 171 Bradley St. Portland, ME 04102		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 30.00		
B. Full Name, Mailing Address and ZIP Code Jean Fine R.R. 5, Box 84 Cape Elizabeth, ME 04107		Name of Employer n/a	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 20.00		
C. Full Name, Mailing Address and ZIP Code Helen J. Flaherty 113 Grant St., #2 Portland, ME 04101		Name of Employer n/a	Date (month, day, year) 06/18/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Teacher Aggregate Year-to-Date > \$ 10.00		
D. Full Name, Mailing Address and ZIP Code Dave Fletcher 83 So. Park Street Bangor, ME 04401		Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 20.00		
E. Full Name, Mailing Address and ZIP Code Mary Flint 11 Court St. Farmington, ME 04938		Name of Employer n/a	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 10.00		
F. Full Name, Mailing Address and ZIP Code Laural Folger 11 Crescent Court South Berwick, ME 03908		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 10.00		
G. Full Name, Mailing Address and ZIP Code Steve Folger 11 Crescent Court South Berwick, ME 03908		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 10.00		

SUBTOTAL of Receipts This Page (optional)

\$110.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 was prepared in accordance
 for each category of the
 Schedules Summary Page

 8 24
 FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11a11

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Joan Fuller RFD 1, Box 175 Livermore Falls, ME 04254		Name of Employer n/a	Date (month, day, year) 06/07/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
B. Full Name, Mailing Address and ZIP Code Donald H. Furth RFD 1, Box 109B Surry, ME 04684		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 50.00	
C. Full Name, Mailing Address and ZIP Code Jo Gacetta 55 Plymouth Rd. South Portland, ME 04106		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 25.00	
D. Full Name, Mailing Address and ZIP Code Elizabeth Gleason Stage Neck Rd. York Harbor, ME 03911		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
E. Full Name, Mailing Address and ZIP Code Bruce Goodwin RR 1, Box 778 Kittery, ME 03904		Name of Employer n/a	Date (month, day, year) 06/17/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
F. Full Name, Mailing Address and ZIP Code Glenith C. Gray P.O. Box 254 Sargentville, ME 04673		Name of Employer n/a	Date (month, day, year) 06/26/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
G. Full Name, Mailing Address and ZIP Code Peter R. Grenier River Rd. P.O. Box 1912 Lewiston, ME 04240		Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 30.00	

SUBTOTAL of Receipts This Page (optional)

\$165.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the listed Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

1111

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NAME OF COMMITTEE (in Full)

Rolda for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Lois I. Gross P.O. Box 135 Bucksport, ME 04416		Name of Employer n/a	Date (month, day, year) 06/12/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code Joseph Habeeb 7 Rachael St. Caribou, ME 04736		Name of Employer n/a	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 10.00	
C. Full Name, Mailing Address and ZIP Code Thomas Habeeb P.O. Box 1236 Caribou, ME 04736		Name of Employer n/a	Date (month, day, year) 06/06/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 10.00	
D. Full Name, Mailing Address and ZIP Code Charles Harriman 98 Field Road Falmouth, ME 04105		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 110.00	
E. Full Name, Mailing Address and ZIP Code Veronica Hartman RR 2, Box 433 South Windham, ME 04082		Name of Employer n/a	Date (month, day, year) 06/26/90	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 30.00	
F. Full Name, Mailing Address and ZIP Code Howard H. Hede Rt. 1, Box 163 A Stockholm, ME 04783		Name of Employer n/a	Date (month, day, year) 06/22/90	Amount of Each Receipt this Period 5.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 5.00	
G. Full Name, Mailing Address and ZIP Code Jean E. Henley RT. 175 North Brooklin, ME 04661		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)

\$290.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 USE SPACE ON THIS PAGE FOR EACH CATEGORY OF THE
 Voluntary Disclosure Summary Page

 20 24
 FOR LINE NUMBER
 11811

VOLUNTARY DISCLOSURE UNITEMIZED INDIVIDUALS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code William Michael Hewes Box 115 Blue Hill, ME 04614	Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 10.00		
B. Full Name, Mailing Address and ZIP Code Tom Hildreth P.O. Box 449 Milford, ME 04461	Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 10.00		
C. Full Name, Mailing Address and ZIP Code Jennie Hilton Hilton Hill Rd. Anson, ME 04911	Name of Employer n/a	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 10.00		
D. Full Name, Mailing Address and ZIP Code Patricia Huston Laurel Terrace Blue Hill Falls, ME 04615	Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 20.00		
E. Full Name, Mailing Address and ZIP Code Wanda L. Ingham 17 Fairview Ave. Augusta, ME 04330	Name of Employer Maine Teachers Association	Date (month, day, year) 06/22/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lab. Negotiator/Rep. Aggregate Year-to-Date > \$ 75.00		
F. Full Name, Mailing Address and ZIP Code William S. Jelin 111 Lake Emerald Dr. Oakland Park, FL 33304	Name of Employer n/a	Date (month, day, year) 06/18/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 50.00		
G. Full Name, Mailing Address and ZIP Code Eleanor Y. Johnson 10 Congress Sq Plaza, 536 Portland, ME 04101	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 10.00		

SUBTOTAL of Receipts This Page (optional)

\$160.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

For each copy of the
United Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11a11

Any information copied from such Records and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Birger T. Johnson 27 Rhode Island Avenue South Portland, ME 04106		Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 35.00	
B. Full Name, Mailing Address and ZIP Code Madeline R. Jordan PO Box 929, 226 Nubble Rd York Beach, ME 03910		Name of Employer n/a	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
C. Full Name, Mailing Address and ZIP Code Walter Keers 51 Donna Road Holliston, MA 01746		Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 10.00	
D. Full Name, Mailing Address and ZIP Code Keron Kerr 504 Cottage Rd. South Portland, ME 04106		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 15.00	
E. Full Name, Mailing Address and ZIP Code Harriet A. Ketover 49 Wingate Drive Portland, ME 04102		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
F. Full Name, Mailing Address and ZIP Code Stephanie A. Koeller 252 Marcy St. Portsmouth, NH 03801		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
G. Full Name, Mailing Address and ZIP Code Karol P. Kucinski PO Box 306 Vinalhaven, ME 04863		Name of Employer n/a	Date (month, day, year) 06/12/90	Amount of Each Receipt this Period 5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Teacher	Aggregate Year-to-Date > \$ 5.00	

SUBTOTAL of Receipts This Page (optional)

\$105.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

For each category of the
Unitemized Summary Page12 24
FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Albert C. Lambert 168 South Street Biddeford, ME 04005		Name of Employer n/a	Date (month, day, year) 06/08/90	Amount of Each Receipt this Period 12.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 12.00	
B. Full Name, Mailing Address and ZIP Code Patricia Lemaire 11 Moreau Ave. Lewiston, ME 04240		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 100.00	
C. Full Name, Mailing Address and ZIP Code Karen Lemke 360 Pride Street Westbrook, ME 04092		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 10.00	
D. Full Name, Mailing Address and ZIP Code Alan Lewis Box 437 Kittery, ME 03904		Name of Employer n/a	Date (month, day, year) 06/17/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
E. Full Name, Mailing Address and ZIP Code Susan V. Lippoth 109 Fieldstone Estates York, ME 03909		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
F. Full Name, Mailing Address and ZIP Code Bob Long 6 Bartlett Lane Eliot, ME 03903		Name of Employer n/a	Date (month, day, year) 06/17/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
G. Full Name, Mailing Address and ZIP Code Geraldine Lufkin 32 Bemis Street Livermore Falls, ME 04254		Name of Employer n/a	Date (month, day, year) 06/07/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 25.00	

SUBTOTAL of Receipts This Page (optional)

\$207.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use address information for each category of the related Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11a11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Frederick Lynch 108 Park St. Portland, ME 04103	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 10.00		
B. Full Name, Mailing Address and ZIP Code Mary G. Markley 65 South Street Gorham, ME 04038	Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 20.00		
C. Full Name, Mailing Address and ZIP Code Phyllis R. Marley 423 Allen Ave. Portland, ME 04103	Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 35.00		
D. Full Name, Mailing Address and ZIP Code Edgar Marquis 55 Pleasant Street Fort Kent, ME 04743	Name of Employer n/a	Date (month, day, year) 06/15/90	Amount of Each Receipt this Period 3.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 3.00		
E. Full Name, Mailing Address and ZIP Code John H. Marvin 15A Fuller Rd., Apt. 201 Augusta, ME 04330	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 100.00		
F. Full Name, Mailing Address and ZIP Code Cherie Mason Goose Cove Road Sunset, ME 04683	Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 25.00		
G. Full Name, Mailing Address and ZIP Code Michael McConnell 118 Palm Street Bangor, ME 04401	Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 35.00		

SUBTOTAL of Receipts This Page (optional)

\$228.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 WITH PREPARED INFORMATION
 FOR EACH CATEGORY OF THE
 Detailed Summary Page

 14 24
 FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Barbara T. McElvee RR 3, Box 24-A, Unit B-7 Caribou, ME 04736		Name of Employer n/a	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code Kathryn J. McInnis 101 North St., Apt. 3 Portland, ME 04102		Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 35.00	
C. Full Name, Mailing Address and ZIP Code Daniel McIntyre 40 Old Mill Road Falmouth, ME 04105		Name of Employer n/a	Date (month, day, year) 06/18/90	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code Donald C. McLean 4 Sweetser Rd. North Yarmouth Cumberland Center, ME 04021		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
E. Full Name, Mailing Address and ZIP Code Helen McMullen 163 Sea Road Kennebunk, ME 04043		Name of Employer n/a	Date (month, day, year) 06/06/90	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 100.00	
F. Full Name, Mailing Address and ZIP Code John McSweeney 40 Miles Ave. Old Orchard Beach, ME 04064		Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 50.00	
G. Full Name, Mailing Address and ZIP Code John McSweeney 40 Miles Ave. Old Orchard Beach, ME 04064		Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 50.00	

SUBTOTAL of Receipts This Page (optional)

\$430.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

For each category of the
Schedule Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/15/90	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 40.00	
B. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/18/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
C. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 40.00	
D. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 50.00	
E. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 50.00	
F. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/04/90	Amount of Each Receipt this Period 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 20.00	
G. Full Name, Mailing Address and ZIP Code Misc.		Name of Employer n/a	Date (month, day, year) 06/04/90	Amount of Each Receipt this Period 28.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 28.00	

SUBTOTAL of Receipts This Page (optional) \$248.00

TOTAL This Period (last page this line number only)

91040842444

SCHEDULE A

ITEMIZED RECEIPTS

 USE SEPARATE SCHEDULES
 for each category of the
 United Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Lauren Mitchell PO Box 2190 Bangor, ME 04401	Name of Employer Mitchell & Mitchell Occupation	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 17.50 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 17.50	
B. Full Name, Mailing Address and ZIP Code Jim Mitchell P.O. Box 2190 Bangor, ME 04401	Name of Employer Mitchell & Mitchell Occupation	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 17.50 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 17.50	
C. Full Name, Mailing Address and ZIP Code Mary Baird Mohler 570 Ocean House Road Cape Elizabeth, ME 04107	Name of Employer n/a Occupation	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 55.00	
D. Full Name, Mailing Address and ZIP Code Mary Baird Mohler 570 Ocean House Road Cape Elizabeth, ME 04107	Name of Employer n/a Occupation	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 55.00	
E. Full Name, Mailing Address and ZIP Code Robert Eric Moore 111 Cider Hill Rd. York, ME 03909	Name of Employer n/a Occupation	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 25.00	
F. Full Name, Mailing Address and ZIP Code Olive B. Moore 7 Mc Keen St. South Paris, ME 04281	Name of Employer n/a Occupation	Date (month, day, year) 06/12/90	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 50.00	
G. Full Name, Mailing Address and ZIP Code Linda Morey 4 Gale St. Gorham, ME 04038	Name of Employer n/a Occupation	Date (month, day, year) 05/30/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date > \$ 35.00	

SUBTOTAL of Receipts This Page (optional)

\$165.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 USE SEPARATE SCHEDULES
 for each category of the
 Voluntary Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11a11

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NAME OF COMMITTEE (in full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Emily Lansingh Muir P.O. Box 55 Stonington, ME 04681	Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code Linda J. Murnik Box 202 Georgetown, ME 04548	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 10.00	
C. Full Name, Mailing Address and ZIP Code Jacqueline Murphy 18 Woodland Drive RR 2, Box 491 Gorham, ME 04038	Name of Employer n/a	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 70.00	
D. Full Name, Mailing Address and ZIP Code Jacqueline Murphy 18 Woodland Drive RR 2, Box 491 Gorham, ME 04038	Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 70.00	
E. Full Name, Mailing Address and ZIP Code Katherine O. Musgrave 15 Kelly Road Orono, ME 04473	Name of Employer n/a	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 50.00	
F. Full Name, Mailing Address and ZIP Code Mary Najarian 173 Pleasant Ave. Portland, ME 04103	Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 25.00	
G. Full Name, Mailing Address and ZIP Code Ralph Newbert 156 Garland St. Bangor, ME 04401	Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 20.00	

SUBTOTAL of Receipts This Page (optional)

\$200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

For each category of the
Detailed Summary Page18 24
FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Harold Pachios 443 Congress St. Portland, ME 04101	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 9.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 9.00	
B. Full Name, Mailing Address and ZIP Code Jane P. Paxton Route #2 Box 324 Augusta, ME 04330	Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 15.00	
C. Full Name, Mailing Address and ZIP Code Violet Pease Box 27, Route 1 Hollis, ME 04042	Name of Employer n/a	Date (month, day, year) 06/25/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 20.00	
D. Full Name, Mailing Address and ZIP Code Grace E. Perkinson P.O. Box 7 Deer Isle, ME 04627	Name of Employer n/a	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 10.00	
E. Full Name, Mailing Address and ZIP Code Rita Perry 361 Haley Rd. Kittery Point, ME 03905	Name of Employer n/a	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 35.00	
F. Full Name, Mailing Address and ZIP Code Gwethalyn M. Phillips 75 S. Park Street Bangor, ME 04401	Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 25.00	
G. Full Name, Mailing Address and ZIP Code Frances Pishny P.O. Box 247 Hancock, ME 04640	Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 20.00	

SUBTOTAL of Receipts This Page (optional)

\$134.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate statements for each category of the listed Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information coming from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Herbert S. Poole P.O. Box 218 York, ME 03909		Name of Employer n/a	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 100.00		
B. Full Name, Mailing Address and ZIP Code Anne M. Rand 61 Melbourne St. Portland, ME 04101		Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 125.00		
C. Full Name, Mailing Address and ZIP Code Henrietta Dana Raymond P.O. Box 238 York Harbor, ME 03911		Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 10.00		
D. Full Name, Mailing Address and ZIP Code Edward S. Randall Blue Hill Falls, ME 04615		Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 20.00		
E. Full Name, Mailing Address and ZIP Code Olive R. Ross Box 11 Readfield, ME 04355		Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 110.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 110.00		
F. Full Name, Mailing Address and ZIP Code Barbara Rossow P.O. Box 426 Blue Hill, ME 04614		Name of Employer n/a	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 25.00		
G. Full Name, Mailing Address and ZIP Code Alice E. Seaward Gerrish Island Kittery Point, ME 03905		Name of Employer n/a	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 45.00		

SUBTOTAL of Receipts This Page (optional)

\$325.00

TOTAL This Period (last page this line number only)

91040342448

SCHEDULE A

ITEMIZED RECEIPTS

 For each category of the
 and Summary Page

FOR LINE NUMBER

11411

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Alice E. Seaward Gerrish Island Kittery Point, ME 03905	Name of Employer n/a Occupation	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 45.00	
B. Full Name, Mailing Address and ZIP Code Kevin Serier 139 Broadway South Portland, ME 04106	Name of Employer n/a Occupation	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 10.00	
C. Full Name, Mailing Address and ZIP Code Arnold Shapiro 7 Round Hill St. Biddeford, ME 04005	Name of Employer n/a Occupation	Date (month, day, year) 06/04/90	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 100.00	
D. Full Name, Mailing Address and ZIP Code Bruce N. Shibbes 6 Shortwharf Rd. Hampden, ME 04444	Name of Employer n/a Occupation	Date (month, day, year) 06/14/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 25.00	
E. Full Name, Mailing Address and ZIP Code Judith C. Simonds 18 Brentwood Rd Cape Elizabeth, ME 04107	Name of Employer n/a Occupation	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 20.00	
F. Full Name, Mailing Address and ZIP Code Roger V. Snow 33 Providence Ave. Falmouth, ME 04105	Name of Employer n/a Occupation	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 10.00	
G. Full Name, Mailing Address and ZIP Code David C. Stewart P.O. Box 112 West Lebanon, ME 04027	Name of Employer n/a Occupation Retired	Date (month, day, year) 05/30/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 135.00	

SUBTOTAL of Receipts This Page (optional)

\$235.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 LESS AMOUNTS OF RECEIPTS
 FOR EACH CATEGORY OF THE
 Itemized Summary Page

FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

11a11

Any information covered from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Nancy T. Stokes R.R. 1, Box 165 165 Channcey Creek Road Kittery Point, ME 03905 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 05/29/90 35.00	Amount of Each Receipt this Period 35.00
B. Full Name, Mailing Address and ZIP Code Tuure Tenander 19 Pleasant St. Kennebunk, ME 04043 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 06/25/90 80.00	Amount of Each Receipt this Period 30.00
C. Full Name, Mailing Address and ZIP Code Barbara C. Thorpe Box 413 Blue Hill, ME 04614 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 06/21/90 10.00	Amount of Each Receipt this Period 10.00
D. Full Name, Mailing Address and ZIP Code Mary Alice Thurston R.R. 1, Box 75A Steuben, ME 04680 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 06/12/90 25.00	Amount of Each Receipt this Period 25.00
E. Full Name, Mailing Address and ZIP Code William M. Trask 158 Eastern Ave. Brewer, ME 04412 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer James River Corp. Occupation Personnel Mngr. Aggregate Year-to-Date > \$	Date (month, day, year) 06/14/90 335.00	Amount of Each Receipt this Period 15.00
F. Full Name, Mailing Address and ZIP Code Edward Trask 1980 No. Blvd. Manhasset, NY 11030 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ralph Lauren Occupation General Manager Aggregate Year-to-Date > \$	Date (month, day, year) 06/21/90 10.00	Amount of Each Receipt this Period 10.00
G. Full Name, Mailing Address and ZIP Code Marjorie Trask P.O. Box 43 Southwest Harbor, ME 04679 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 06/21/90 10.00	Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)

\$135.00

TOTAL This Period (last page this line number only)

SCHEDULE A

UNITIZED RECEIPTS

 Use separate schedules
for each category of the
above Summary Page

 OF
22 24
FOR LINE NUMBER
11111

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Elizabeth Trask P.O. Box 43 Southwest Harbor, ME 04679	Name of Employer n/a Occupation	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 10.00		
B. Full Name, Mailing Address and ZIP Code Suzanne Trask 158 Eastern Ave. Brewer, ME 04412	Name of Employer n/a Occupation	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 10.00		
C. Full Name, Mailing Address and ZIP Code Joseph M. Trask P.O. Box 43 Southwest Harbor, ME 04679	Name of Employer n/a Occupation	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 25.00		
D. Full Name, Mailing Address and ZIP Code Harry E. Triplett P.O. Box 716 Bar Harbor, ME 04609	Name of Employer n/a Occupation	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 220.00		
E. Full Name, Mailing Address and ZIP Code Douglas A. Ura-neck 82 Willow Street South Portland, ME 04106	Name of Employer n/a Occupation	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 35.00		
F. Full Name, Mailing Address and ZIP Code Phil Veilleux 39 Bosworth Old Town, ME 04468	Name of Employer n/a Occupation	Date (month, day, year) 06/27/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 20.00		
G. Full Name, Mailing Address and ZIP Code Arvilla R. Vercelles 116 Jackson Street Bangor, ME 04401	Name of Employer n/a Occupation	Date (month, day, year) 06/19/90	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 20.00		

SUBTOTAL of Receipts This Page (optional)

\$220.00

TOTAL This Period (last page this line number only)

SCHEDULE A

UNITIZED RECEIPTS

Use separate statements for each category of the listed Summary Page

23 24
FOR LINE NUMBER

VOLUNTARY DISCLOSURE OF UNITIZED INDIVIDUALS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Maxine S. Vincent 98 Winding Way Portland, ME 04102	Name of Employer n/a	Date (month, day, year) 06/26/90	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code Tacha Vosburgh 34 Park St. Portland, ME 04103	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 10.00	
C. Full Name, Mailing Address and ZIP Code Merton C. Waterman P.O. Box 26 Bar Mills, ME 04004	Name of Employer n/a	Date (month, day, year) 06/21/90	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 40.00	
D. Full Name, Mailing Address and ZIP Code Diana Tomasello Waterman RR 1, Box 1216, 32nd St. Shapleigh, ME 04076	Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 105.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 130.00	
E. Full Name, Mailing Address and ZIP Code Meadow E. Welch 83 Narragansett St. Gorham, ME 04038	Name of Employer n/a	Date (month, day, year) 06/01/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 35.00	
F. Full Name, Mailing Address and ZIP Code Douglas L. Wheeler 27 Mill Rd. Durham, NH 03824	Name of Employer n/a	Date (month, day, year) 06/05/90	Amount of Each Receipt this Period 120.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 120.00	
G. Full Name, Mailing Address and ZIP Code Polly Wilkinson 7 Fore St. Portland, ME 04101	Name of Employer n/a	Date (month, day, year) 05/24/90	Amount of Each Receipt this Period 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 10.00	

SUBTOTAL of Receipts This Page (optional)

\$345.00

TOTAL This Period (last page this line number only)

91040342452

SCHEDULE A

ITEMIZED RECEIPTS

USE REPORTER'S COPY OF THIS FORM TO PREPARE THE AGGREGATE SUMMARY PAGE

 24 24
 FOR LINE NUMBER
 11a11

VOLUNTARY DISCLOSURE OF UNITEMIZED INDIVIDUALS

Any information received from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such contributors.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Ira M. Wine 1831 Washington Ave. Portland, ME 04103	Name of Employer N/A Occupation	Date (month, day, year) 05/29/90	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 35.00		
B. Full Name, Mailing Address and ZIP Code David Wood 75 Maarket Street Portland, ME 04101	Name of Employer N/A Occupation	Date (month, day, year) 06/18/90	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 10.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		

\$45.00

SUBTOTAL of Receipts This Page (optional)

\$4,975.30

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate statements
for each category of the
and Summary PagePAGE 3
OF 3
FOR LINE NUMBER

Any information copied from such Receipts and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such contributors.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Weston House Bed & Breakfast 26 Boynton Street Eastport, ME 04631		Name of Employer	Date (month, day, year) 06/06/90	Amount of Each Receipt this Period 50.00 in-kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 50.00	
B. Full Name, Mailing Address and ZIP Code UAW V CAP 8000 E. Jefferson Detroit, MI 48214		Name of Employer	Date (month, day, year) 06/12/90	Amount of Each Receipt this Period 2000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 2000.00	
C. Full Name, Mailing Address and ZIP Code Jolly John's Equipment Leasing Company P.O. Box 1430 Saco, ME 04072		Name of Employer	Date (month, day, year) 06/11/90	Amount of Each Receipt this Period 72.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 72.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$2,122.00

TOTAL This Period (last page this line number only) \$2,122.00

91040842454

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the listed Summary Page

FOR LINE NUMBER

15

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Maine National Bank 400 Congress Street Portland, ME 04101</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p> <p>05/31/90</p>	<p>Amount of Each Receipt this Period</p> <p>54.39</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$ 317.94</p>	
<p>B. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$</p>	
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$</p>	
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$</p>	
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$</p>	
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$</p>	
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>Other (specify):</p>		<p>Aggregate Year-to-Date > \$</p>	

SUBTOTAL of Receipts This Page (optional)

\$54.39

TOTAL This Period (last page this line number only)

\$54.39

91040842455

SCHEDULE B

ITEMIZED DISBURSEMENTS

PAGE 1 OF 19

See instructions (schedule B)
for each category of the
Detailed Summary Page

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Aim Telephones of New England PO Box 377 Cumberland, ME 04021	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 473.55
B. Full Name, Mailing Address and ZIP Code Aim Telephones of New England PO Box 377 Cumberland, ME 04021	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 110.25
C. Full Name, Mailing Address and ZIP Code Alan Rudman 22 Meadow Drive Hollis, NH 03049	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 681.37
D. Full Name, Mailing Address and ZIP Code Alan Rudman 22 Meadow Drive Hollis, NH 03049	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 896.60
E. Full Name, Mailing Address and ZIP Code Alan Rudman 22 Meadow Drive Hollis, NH 03049	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 681.37
F. Full Name, Mailing Address and ZIP Code Andy Grossman 111 Franklin St. Portland, ME 04101	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Andy Grossman 111 Franklin St. Portland, ME 04101	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 401.95
H. Full Name, Mailing Address and ZIP Code Andy Grossman 111 Franklin St. Portland, ME 04101	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 401.95
I. Full Name, Mailing Address and ZIP Code Andy Grossman 111 Franklin St. Portland, ME 04101	Purpose of Disbursement Candidate's Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/22/90	Amount of Each Disbursement This Period 96.71

SUBTOTAL of Disbursements This Page (optional)

\$4,243.75

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Andy Grossman 111 Franklin St. Portland, ME 04101	Purpose of Disbursement Candidate's Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 100.00
B. Full Name, Mailing Address and ZIP Code Anthony Corrado Dept. Of Government Waterville, ME 04901	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 3,000.00
C. Full Name, Mailing Address and ZIP Code Anthony Corrado Dept. Of Government Waterville, ME 04901	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 3,000.00
D. Full Name, Mailing Address and ZIP Code Atkins Printing Service 155 Main Street Waterville, ME 04901	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/25/90	Amount of Each Disbursement This Period 290.00
E. Full Name, Mailing Address and ZIP Code Barbara S. Holt Fort Ridge Rd Alfred, ME 04002	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 865.41
F. Full Name, Mailing Address and ZIP Code Barbara S. Holt Fort Ridge Rd Alfred, ME 04002	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,279.76
G. Full Name, Mailing Address and ZIP Code Barbara S. Holt Fort Ridge Rd Alfred, ME 04002	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 865.41
H. Full Name, Mailing Address and ZIP Code Barbara S. Holt Fort Ridge Rd. Alfred, ME 04002	Purpose of Disbursement Ancillary Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 937.84
I. Full Name, Mailing Address and ZIP Code Barbara S. Holt Fort Ridge Rd. Alfred, ME 04002	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 60.00

SUBTOTAL of Disbursements This Page (optional)

\$10,398.42

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Bob Stein 40 Dirigo St. Portland, ME 04102	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 1,033.37
B. Full Name, Mailing Address and ZIP Code Bob Stein 40 Dirigo St. Portland, ME 04102	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 252.43
C. Full Name, Mailing Address and ZIP Code Bob Stein 40 Dirigo St. Portland, ME 04102	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 1,033.37
D. Full Name, Mailing Address and ZIP Code Bob Stein 40 Dirigo Street Portland, ME 04102	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 87.18
E. Full Name, Mailing Address and ZIP Code Bob Stein 40 Dirigo Street Portland, ME 04102	Purpose of Disbursement travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 35.15
F. Full Name, Mailing Address and ZIP Code Bureau Of Taxation (State) Income Tax Division Augusta, ME 04333	Purpose of Disbursement state taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 685.50
G. Full Name, Mailing Address and ZIP Code Bureau Of Taxation (State) Income Tax Division Augusta, ME 04333	Purpose of Disbursement state taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 1,003.00
H. Full Name, Mailing Address and ZIP Code Burgess, Brewer Stanyon & Payne 1290 Congress St Portland, ME 04102	Purpose of Disbursement advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 10,000.00
I. Full Name, Mailing Address and ZIP Code Catama Productions, Inc. 38 Field Road Cumberland, ME 04021	Purpose of Disbursement tv production Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 8,000.00

SUBTOTAL of Disbursements This Page (optional)

\$22,130.00

TOTAL This Period (last page this line number only)

91040842458

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 Detailed Summary Page

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Connecting Point Computer Ctr. 319 Marginal Way Portland, ME 04101	Purpose of Disbursement computer equipment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 2,693.25
B. Full Name, Mailing Address and ZIP Code Custodian Petty Cash C/O Diane Laneri Portland, ME 04104	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 100.00
C. Full Name, Mailing Address and ZIP Code Custodian Petty Cash C/O Diane Laneri Portland, ME 04104	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 100.00
D. Full Name, Mailing Address and ZIP Code Custodian Petty Cash C/O Diane Laneri Portland, ME 04104	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/22/90	Amount of Each Disbursement This Period 100.00
E. Full Name, Mailing Address and ZIP Code Custodian Petty Cash C/O Diane Laneri Portland, ME 04104	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 100.00
F. Full Name, Mailing Address and ZIP Code Custodian Petty Cash C/O Diane Laneri Portland, ME 04104	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 100.00
G. Full Name, Mailing Address and ZIP Code Custodian Petty Cash C/O Diane Laneri Portland, ME 04104	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 100.00
H. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/25/90	Amount of Each Disbursement This Period 403.20
I. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 252.00

SUBTOTAL of Disbursements This Page (optional)

\$3,948.45

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

See schedule(s)
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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 78.50
B. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,260.00
C. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 163.80
D. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 315.00
E. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 60.90
F. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 93.45
G. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 399.00
H. Full Name, Mailing Address and ZIP Code Dale Rand Printing 102 Portland St Portland, ME 04101	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 283.50
I. Full Name, Mailing Address and ZIP Code Design Alliance 75 Market Street Portland, ME 04104	Purpose of Disbursement utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 261.10

SUBTOTAL of Disbursements This Page (optional)

\$2,915.25

TOTAL This Period (last page this line number only)

91040842460

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Design Alliance 75 Market Street Portland, ME 04104	Purpose of Disbursement utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 405.42
B. Full Name, Mailing Address and ZIP Code Diane P. Laneri RR2 Box 172 East Lebanon, ME 04027	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 779.44
C. Full Name, Mailing Address and ZIP Code Diane P. Laneri RR2 Box 172 East Lebanon, ME 04027	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,185.32
D. Full Name, Mailing Address and ZIP Code Diane P. Laneri RR2 Box 172 East Lebanon, ME 04027	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 779.44
E. Full Name, Mailing Address and ZIP Code Diane P. Laneri RR 2, Box 172 East Lebanon, ME 04027	Purpose of Disbursement Ancillary Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 259.57
F. Full Name, Mailing Address and ZIP Code Diane P. Laneri RR 2, Box 172 East Lebanon, ME 04027	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 45.00
G. Full Name, Mailing Address and ZIP Code Diane P. Laneri RR 2, Box 172 East Lebanon, ME 04027	Purpose of Disbursement Ancillary Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 308.66
H. Full Name, Mailing Address and ZIP Code Eric Bendetson 16 Smithwheel Rd Old Orchard, ME 04064	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 791.22
I. Full Name, Mailing Address and ZIP Code Eric Bendetson 16 Smithwheel Rd Old Orchard, ME 04064	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 791.22

SUBTOTAL of Disbursements This Page (optional)

\$5,345.29

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Rolds for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Eric Bendetson 16 Smithwheel Rd Old Orchard, ME 04064	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 791.22
B. Full Name, Mailing Address and ZIP Code Free Spirit P.O. Box 3212 Portland, ME 04104	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 288.00
C. Full Name, Mailing Address and ZIP Code Ian Gamble 167 Clearwater Drive Falmouth, ME 04105	Purpose of Disbursement Recycling/State Convention Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 220.00
D. Full Name, Mailing Address and ZIP Code Ian Gamble 167 Clearwater Drive Falmouth, ME 04105	Purpose of Disbursement Recycling/State Convention Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 611.38
E. Full Name, Mailing Address and ZIP Code Jeff Wilford 64 1/2 Brixham Rd Eliot, ME 03903	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 675.34
F. Full Name, Mailing Address and ZIP Code Jeff Wilford 64 1/2 Brixham Rd Eliot, ME 03903	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 997.66
G. Full Name, Mailing Address and ZIP Code Jeff Wilford 64 1/2 Brixham Rd Eliot, ME 03903	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 675.34
H. Full Name, Mailing Address and ZIP Code Jeff Wilford 64 1/2 Brixham Rd. Eliot, ME 03903	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 75.60
I. Full Name, Mailing Address and ZIP Code Jeff Wilford 64 1/2 Brixham Rd. Eliot, ME 03903	Purpose of Disbursement Ancillary Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 72.63

SUBTOTAL of Disbursements This Page (optional)

\$4,407.17

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Jim Mitchell 185 Harlow St. Bangor, ME 04401	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 665.00
B. Full Name, Mailing Address and ZIP Code Jim Mitchell 185 Harlow St. Bangor, ME 04401	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 385.00
C. Full Name, Mailing Address and ZIP Code Joe Perham P.O. Box 295 West Paris, ME 04289	Purpose of Disbursement entertainment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 450.00
D. Full Name, Mailing Address and ZIP Code John Martin Fund State House Augusta, ME 04330	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 250.00
E. Full Name, Mailing Address and ZIP Code John McDonald 64 East Street South Paris, ME 04281	Purpose of Disbursement entertainment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code John Rudolph 126 Ol Field Rd S. Berwick, ME 03908	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 2,090.00
G. Full Name, Mailing Address and ZIP Code John Rudolph 126 Ol Field Rd S. Berwick, ME 03908	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,900.00
H. Full Name, Mailing Address and ZIP Code John Rudolph 126 Ol Field Rd S. Berwick, ME 03908	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 2,280.00
I. Full Name, Mailing Address and ZIP Code Karl Rogers P.O. Box 9715-221 Portland, ME 04104	Purpose of Disbursement Graphic Design/Layout/Type Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 265.00

SUBTOTAL of Disbursements This Page (optional)

\$8,785.00

TOTAL This Period (last page this line number only)

91040842463

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Karl Rogers P.O. Box 9715-221 Portland, ME 04104	Purpose of Disbursement Graphic Design/Layout/Type Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 177.50
B. Full Name, Mailing Address and ZIP Code Kathleen Doherty 89 Alden Circle Portland, ME 04102	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 428.21
C. Full Name, Mailing Address and ZIP Code Kathleen Doherty 89 Alden Circle Portland, ME 04102	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 424.63
D. Full Name, Mailing Address and ZIP Code Kathleen Doherty 89 Alden Circle Portland, ME 04102	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 549.67
E. Full Name, Mailing Address and ZIP Code Keddy's Hotels & Inns Houlton Rd. Presque Isle, ME 04769	Purpose of Disbursement lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 1,348.59
F. Full Name, Mailing Address and ZIP Code Kelly O'Reilly Associates PO Box 542 Portland, ME 04112	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 165.00
G. Full Name, Mailing Address and ZIP Code Kelly O'Reilly Associates PO Box 542 Portland, ME 04112	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/15/90	Amount of Each Disbursement This Period 137.50
H. Full Name, Mailing Address and ZIP Code Kelly O'Reilly Associates PO Box 542 Portland, ME 04112	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 440.00
I. Full Name, Mailing Address and ZIP Code Kendall Morse P.O. Box 313 Scarborough, ME 04074	Purpose of Disbursement entertainment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional)

\$4,171.10

TOTAL This Period (last page this line number only)

91040842464

This schedule
 is a summary of the
 Disbursements Page

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolds for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Kennebec Journal 274 Western Avenue Augusta, ME 04332	Purpose of Disbursement publications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/25/90	Amount of Each Disbursement This Period 528.00
B. Full Name, Mailing Address and ZIP Code Kennebec Journal 274 Western Avenue Augusta, ME 04332	Purpose of Disbursement Newspaper Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 68.40
C. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad St. Rockland, ME 04841	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 794.46
D. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad St. Rockland, ME 04841	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 936.37
E. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad St. Rockland, ME 04841	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 794.46
F. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad Street Rockland, ME 04841	Purpose of Disbursement fuel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/25/90	Amount of Each Disbursement This Period 200.00
G. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad Street Rockland, ME 04841	Purpose of Disbursement office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 32.69
H. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad Street Rockland, ME 04841	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 60.00
I. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad Street Rockland, ME 04841	Purpose of Disbursement fuel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/22/90	Amount of Each Disbursement This Period 200.00

SUBTOTAL of Disbursements This Page (optional)

\$3,614.38

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

PAGE 11 OF 19

 (See instructions
for each category of the
Detailed Summary Page)

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolds for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad Street Rockland, ME 04841	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 51.16
B. Full Name, Mailing Address and ZIP Code Kevin Parks 43 1/2 Broad Street Rockland, ME 04841	Purpose of Disbursement Canvass travel expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 60.00
C. Full Name, Mailing Address and ZIP Code Kinko's Copies P.O. Box 8033 Ventura, CA 93002	Purpose of Disbursement photocopying Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 215.02
D. Full Name, Mailing Address and ZIP Code Kinko's Copies P.O. Box 8033 Ventura, CA 93002	Purpose of Disbursement photocopying Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 165.69
E. Full Name, Mailing Address and ZIP Code Kinko's Copies P.O. Box 8033 Ventura, CA 93002	Purpose of Disbursement photocopying Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 143.43
F. Full Name, Mailing Address and ZIP Code Kirsten Bartok P.O. Box 95 Moody, ME 04054	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 454.36
G. Full Name, Mailing Address and ZIP Code Lisa A. Mills 78 Cat Mousam Kennebunk, ME 04043	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 960.37
H. Full Name, Mailing Address and ZIP Code Lisa A. Mills 78 Cat Mousam Kennebunk, ME 04043	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,347.65
I. Full Name, Mailing Address and ZIP Code Lisa A. Mills 78 Cat Mousam Kennebunk, ME 04043	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 960.37

SUBTOTAL of Disbursements This Page (optional)

\$4,358.05

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Lisa A. Mills 78 Cat Mousam Kennebunk, ME 04043	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 141.00
B. Full Name, Mailing Address and ZIP Code Locke Office Products 50 Riverside Street Portland, ME 04104	Purpose of Disbursement office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 73.12
C. Full Name, Mailing Address and ZIP Code Locke Office Products 50 Riverside Street Portland, ME 04104	Purpose of Disbursement office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 221.62
D. Full Name, Mailing Address and ZIP Code Loring Short & Harmon PO Box 1220 Portland, ME 04104	Purpose of Disbursement office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 64.68
E. Full Name, Mailing Address and ZIP Code Loring Short & Harmon PO Box 1220 Portland, ME 04104	Purpose of Disbursement office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 6.92
F. Full Name, Mailing Address and ZIP Code Loring Short & Harmon PO Box 1220 Portland, ME 04104	Purpose of Disbursement office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 74.09
G. Full Name, Mailing Address and ZIP Code Lou Morin 947A Congress Street Portland, ME 04101	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 615.89
H. Full Name, Mailing Address and ZIP Code Lou Morin 947A Congress Street Portland, ME 04101	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 615.89
I. Full Name, Mailing Address and ZIP Code Lou Morin 947A Congress Street Portland, ME 04101	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 615.89

SUBTOTAL of Disbursements This Page (optional)

\$2,429.10

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEM 2 DISBURSEMENTS

PAGE 13 OF 19

For each disbursement, list the category of the disbursement on the Detailed Summary Page

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Maine Aviation Corporation Portland Internat Jetport Portland, ME 04102	Purpose of Disbursement airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 890.00
B. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement federal taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 6,344.82
C. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement federal taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 4,335.98
D. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement service charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/14/90	Amount of Each Disbursement This Period 34.00
E. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement federal taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 4,201.26
F. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 20.66
G. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 22.00
H. Full Name, Mailing Address and ZIP Code Maine National Bank 400 Congress ST Portland, ME 04101	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 15.00
I. Full Name, Mailing Address and ZIP Code Maine People's Alliance PO Box 17534 Portland, ME 04101	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional) \$16,863.72

TOTAL This Period (last page this line number only)

91040842468

(Indicate the category of the
 Disbursement on the
 Detailed Summary Page)

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR4 Box 2105 Wells, ME 04090	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 652.06
B. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR4 Box 2105 Wells, ME 04090	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 955.31
C. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR4 Box 2105 Wells, ME 04090	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 652.06
D. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR 4, Box 2105 Wells, ME 04090	Purpose of Disbursement travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 281.51
E. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR 4, Box 2105 Wells, ME 04090	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 60.00
F. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR 4, Box 2105 Wells, ME 04090	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 110.53
G. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR 4, Box 2105 Wells, ME 04090	Purpose of Disbursement Canvass travel expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 45.00
H. Full Name, Mailing Address and ZIP Code Mark P. Fournier RR 4, Box 2105 Wells, ME 04090	Purpose of Disbursement travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 88.42
I. Full Name, Mailing Address and ZIP Code Marttila & Kiley, Inc. 84 State Street Boston, MA 02109	Purpose of Disbursement travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 239.06

SUBTOTAL of Disbursements This Page (optional)

\$3,083.95

TOTAL This Period (last page this line number only)

91040842469

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Michael Segal 10 Fairfield Street Cambridge, MA 02140	Purpose of Disbursement research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/22/90	Amount of Each Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Michael W. Pajak 232 Main Ave Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 685.34
C. Full Name, Mailing Address and ZIP Code Michael W. Pajak 232 Main Ave Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 736.06
D. Full Name, Mailing Address and ZIP Code Michael W. Pajak 232 Main Ave Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 730.37
E. Full Name, Mailing Address and ZIP Code Mike Roland 40 Leland St. Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 615.89
F. Full Name, Mailing Address and ZIP Code Mike Roland 40 Leland St. Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 615.89
G. Full Name, Mailing Address and ZIP Code Mike Roland 40 Leland St. Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 615.89
H. Full Name, Mailing Address and ZIP Code New England Telephone 5 Davis Farm Rd Portland, ME 04103	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 350.00
I. Full Name, Mailing Address and ZIP Code New England Telephone 5 Davis Farm Rd Portland, ME 04103	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 611.70

SUBTOTAL of Disbursements This Page (optional)

\$9,961.14

TOTAL This Period (last page this line number only)

91040842470

(If the disbursement is a reimbursement of the
 Disbursements Page

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Rolds for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code New England Telephone 5 Davis Farm Rd Portland, ME 04103	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,235.37
B. Full Name, Mailing Address and ZIP Code Nicole Cirelli 56 Lane Avenue Portland, ME 04103	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 369.57
C. Full Name, Mailing Address and ZIP Code North Eastland Hotel 436 Main Street Presque Isle, ME 04759	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/25/90	Amount of Each Disbursement This Period 312.50
D. Full Name, Mailing Address and ZIP Code Patrick Damon 5 N. Ridge Rd. #24 North Windham, ME 04062	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 564.62
E. Full Name, Mailing Address and ZIP Code Perkins Coie 1110 Vermont Ave. N.W. Washington, DC 20005	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 3,916.75
F. Full Name, Mailing Address and ZIP Code Postmaster 125 Forest Ave Portland, ME 04101	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 100.00
G. Full Name, Mailing Address and ZIP Code Postmaster 125 Forest Ave Portland, ME 04101	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 325.00
H. Full Name, Mailing Address and ZIP Code Postmaster 125 Forest Ave Portland, ME 04101	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 100.00
I. Full Name, Mailing Address and ZIP Code Rocks' Motel & Diner Main Street Fort Kent, ME 04743	Purpose of Disbursement lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 432.00

SUBTOTAL of Disbursements This Page (optional)

\$7,355.81

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code Sandra Gilbert 48 Hunter Rd. Freeport, ME 04032	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 628.89
B. Full Name, Mailing Address and ZIP Code Sandra Gilbert 48 Hunter Rd. Freeport, ME 04032	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 628.89
C. Full Name, Mailing Address and ZIP Code Sandra Gilbert 48 Hunter Rd. Freeport, ME 04032	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 628.89
D. Full Name, Mailing Address and ZIP Code Sean Faircloth 122 Maple Street Bangor, ME 04401	Purpose of Disbursement food and beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/19/90	Amount of Each Disbursement This Period 33.80 in-kind
E. Full Name, Mailing Address and ZIP Code Speaker's Presque Isle Convention State House Augusta, ME 04330	Purpose of Disbursement State Convention Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 770.12
F. Full Name, Mailing Address and ZIP Code Star Cellular 323 North Street Saco, ME 04072	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 32.62
G. Full Name, Mailing Address and ZIP Code Star Cellular 323 North Street Saco, ME 04072	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 393.49
H. Full Name, Mailing Address and ZIP Code Star Cellular 323 North Street Saco, ME 04072	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 71.92
I. Full Name, Mailing Address and ZIP Code Star Cellular 323 North Street Saco, ME 04072	Purpose of Disbursement telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 203.24

SUBTOTAL of Disbursements This Page (optional)

\$3,391.86

TOTAL This Period (last page this line number only)

See instructions on schedule(s)
for most categories of the
Detailed Summary Page

FOR LINE NUMBER 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code State Democratic Committee P.O. Box 5258 Augusta, ME 04332	Purpose of Disbursement meals Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 350.00
B. Full Name, Mailing Address and ZIP Code The Design Alliance 75 Market Street Portland, ME 04104	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 2,250.00
C. Full Name, Mailing Address and ZIP Code The Design Alliance 75 Market Street Portland, ME 04104	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 2,250.00
D. Full Name, Mailing Address and ZIP Code Tim Sample Downeast Humorist 16 Winter Street Bath, ME 04530	Purpose of Disbursement entertainment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 1,200.00
E. Full Name, Mailing Address and ZIP Code V.I.P. Charters 129-137 Fox Portland, ME 04103	Purpose of Disbursement car rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 1,460.00
F. Full Name, Mailing Address and ZIP Code Village Travel PO Box 747 York, ME 03909	Purpose of Disbursement airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/13/90	Amount of Each Disbursement This Period 126.00
G. Full Name, Mailing Address and ZIP Code Village Travel PO Box 747 York, ME 03909	Purpose of Disbursement airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/29/90	Amount of Each Disbursement This Period 199.00
H. Full Name, Mailing Address and ZIP Code WABI-TV 35 Hildreth Street Bangor, ME 04401	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 1,253.75
I. Full Name, Mailing Address and ZIP Code WAGM-TV P.O. Box 1149 Presque Isle, ME 04769	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 1,657.50

SUBTOTAL of Disbursements This Page (optional)

\$10,746.25

TOTAL This Period (last page this line number only)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Rolde for U. S. Senate C00239798

A. Full Name, Mailing Address and ZIP Code WCSH-TV One Congress Street Portland, ME 04101	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 4,524.55
B. Full Name, Mailing Address and ZIP Code WGME-TV PO Box 1731 Portland, ME 04104	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 3,598.05
C. Full Name, Mailing Address and ZIP Code WGME-TV PO Box 1731 Portland, ME 04104	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 850.00
D. Full Name, Mailing Address and ZIP Code WLBZ-TV Mt. Hope Ave Bangor, ME 04401	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 1,343.00
E. Full Name, Mailing Address and ZIP Code WMTW-TV 119 Middle Street Portland, ME 04112	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 3,888.75
F. Full Name, Mailing Address and ZIP Code WPXT-TV 2320 Congress Street Portland, ME 04102	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 505.75
G. Full Name, Mailing Address and ZIP Code WVII-TV Target Industrial Circ. Bangor, ME 04401	Purpose of Disbursement tv advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/90	Amount of Each Disbursement This Period 2,108.00
H. Full Name, Mailing Address and ZIP Code Weston House Bed & Breakfast 26 Boynton Street Eastport, ME 04631	Purpose of Disbursement lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/06/90	Amount of Each Disbursement This Period 50.00 in-kind
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) \$16,868.10

TOTAL This Period (last page this line number only) \$145,016.79

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Name of Committee:

Rolde for Senate Committee

	Outstanding Balance Begin This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance Close of This Period
A. Debtor or Creditor: Burgess, Brewer Stanyon & Payne 1290 Congress St Portland, ME 04102			10000.00	50000.00
Debt (purpose): advertising				
B. Debtor or Creditor: Michael Segal 10 Fairfield Street Cambridge, MA 02140	.00	8000.00	5000.00	3000.00
Debt (purpose): research				
C. Debtor or Creditor: Maine People's Alliance PO Box 17534 Portland, ME 04101			1000.00	1000.00
Debt (purpose): consulting				
D. Debtor or Creditor: Anthony Corrado Dept. Of Government Waterville, ME 04901			6000.00	9000.00
Debt (purpose): consulting				
E. Debtor or Creditor: Labor Record PO Box 1523 Windham, ME 04062				1732.80
Debt (purpose): newspaper ads				
F. Debtor or Creditor: The Design Alliance 75 Market Street Portland, ME 04104			4500.00	9000.00
Debt (purpose): rent				

- 91040842475
- 1) Subtotal this Period this Page..... \$73,732.80
 - 2) Total this Period..... \$73,732.80
 - 3) Total Outstanding Loans from Schedule C..... \$
 - 4) Add 2) and 3) and carry forward to Summary Page..... \$



FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20461

RQ-2

AUG 7 1990

Larry J. Kennedy, Treasurer
Rolde for US Senate Campaign
75 Market Street
Portland, ME 04104

Identification Number: C00239798

Reference: July Quarterly Report (5/24/90-6/30/90)

Dear Mr. Kennedy:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule D of your report fails to supply certain information. Commission Regulations require the full name and mailing address of each creditor, the outstanding balance at the beginning and end of the reporting period, the amount incurred during this period, any payment made during this period, and the nature or purpose of each debt. All debts must be reported until extinguished or settled. Please amend your report to include the omitted information. (11 CFR §104.11)

done
✓

-Schedule A of your report indicates that your committee may have failed to file one or more of the required 48 hour notices regarding "last minute" contributions received by your committee after the close of books for the 12 Day Pre-Primary report. A principal campaign committee must notify the Commission, in writing, within 48 hours of any contribution of \$1,000 or more received between two and twenty days before an election. These contributions are then reported on the next report required to be filed by the committee. To ensure that the Commission is notified of last minute contributions of \$1,000 or more to your campaign, it is recommended that you review your procedures for checking contributions received during the aforementioned time period. Although the Commission may take legal action, any response you wish to make concerning this matter will be taken into consideration. (11 CFR §104.5(f))

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A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 376-2480.

Sincerely,

Pat Sheppard

Pat Sheppard
Senior Reports Analyst
Reports Analysis Division

91040842477

August 16, 1990

Office of Public Records
Office of the Secretary of the Senate
232 Hart Senate Office Building
Washington, DC 20510-7116

Federal Election Commission
Attn: Pat Sheppard, Senior Reports Analyst
Reports Division
Washington, DC 20463

Identification Number: C00239798

Reference: July Quarterly Report (5/24/90 - 6/30/90)

Dear Ms. Sheppard:

I am writing in response to your letter regarding the report referenced above.

The information that you requested regarding Schedule D was corrected with the submission of our amended Quarterly report, submitted to you on July 30, 1990.

Two 48 hour notices for "last minute" contributions, each greater than \$1,000.00 and received between two and twenty days before the primary election, were not filed due to the fact that we were unaware of this policy. The error was inadvertent on our behalf and we have taken the necessary steps to ensure that it does not reoccur. Please refer to the attached paperwork for the information on the two aforementioned contributions.

I regret any inconvenience to the commission and if you require further information please feel free to contact me at (207)775-6345.

Best regards,

Larry J. Kennedy
Treasurer

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48 HOUR NOTIFICATION OF CONTRIBUTIONS

Name of Candidate Neil R. Rolde

Office Sought by Candidate U.S. Senate Candidate

Identification of Contributor Neil R. Rolde
P.O. Box 304
York, ME 03909

Date of Receipt May 30, 1990

Amount of Contribution \$61,000.00

Name of Candidate Neil R. Rolde

Office Sought by Candidate U.S. Senate Candidate

Identification of Contributor UAW V CAP
PAC #C00002840
8000 E. Jefferson
Detroit, MI 48214

Date of Receipt June 12, 1990

Amount of Contribution \$2,000.00

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October 25, 1990

Office of Public Records
Office of the Secretary of the Senate
232 Hart Senate Office Building
Washington, DC 20510-7116

Federal Election Commission
Attn: Pat Sheppard, Senior Reports Analyst
Reports Division
Washington, DC 20463

Identification Number: CO0239798

48 HOUR NOTIFICATION OF CONTRIBUTIONS

Name of Candidate Neil R. Rolde

Office Sought by Candidate U.S. Senate Candidate

Identification of Contributor Neil R. Rolde
P.O. Box 304
York, ME 03909

Date of Receipt October 25, 1990

Amount of Contribution \$142,594.00

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NEIL ROLDE

DEMOCRAT FOR U.S. SENATE

October 29, 1990

Office of Public Records
Office of the Secretary of the Senate
232 Hart Senate Office Building
Washington, DC 20510-7116

Federal Election Commission
Attn: Pat Sheppard, Senior Reports Analyst
Reports Division
Washington, DC 20463

Identification Number: COO239798

Dear Pat:

Attached you will find a notice for a "last minute" contribution to the Rolde for U.S. Senate Campaign. In accordance with FEC regulations this contribution is being reported to you within forty-eight hours of receipt.

Sincerely,

Kathleen Doherty
Financial Coordinator

Enclosure

91040842481

48 HOUR NOTIFICATION OF CONTRIBUTIONS

Name of Candidate
Neil R. Rolde

Office Sought by Candidate
U.S. Senate Candidate

Identification of Contributor
Ironworkers Political Action League
1750 New York Avenue, N.W.
Washington, D.C. 20006
PAC #C00027359

Date of Receipt October 29, 1990

Amount of Contribution \$ 1,000.00

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Amendment 4
EXHIBIT F

NEIL ROLDE

DEMOCRAT FOR U.S. SENATE

July 30, 1990

Office of Public Records
Office of the Secretary of the Senate
232 Hart Senate Office Building
Washington, DC 20510-7116

Federal Election Commission
Washington, DC 20463
Attn: Pat Sheppard, Senior Reports Analyst
Reports Division

Identification Number: C00239798

Reference: July 15 Quarterly Report

Dear Ms. Sheppard:

I am writing to inform you that errors were discovered on the July 15 Quarterly Report, covering the period 5/24/90 through 6/30/90, dated 7/10/90.

Due to the combination of a computer program and clerical error, four entries on the Debts and Obligations Report (Schedule D) were inadvertently omitted. These omissions are contained on the attached amended report for your review.

On Schedule B of the report of Receipts and Expenditures, we incorrectly used 'ancillary campaign expenses' as a purpose description for a few disbursements. We realized that this description would be inappropriate for the FEC, and have subsequently changed these descriptions to more accurate ones.

On Schedule B we have noted, with an asterisk and brief description, disbursements that did not print on the original July 15 Quarterly Report because of a clerical error. This error resulted in the creation of a separate file for certain payees. These separate files contained disbursements whose accumulated totals did not exceed the

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\$200.00 aggregate threshold needed for itemization. We have taken steps to ensure that this clerical error does not re-occur.

Enclosed you will find an amended Summary, Schedule B, and Schedule D. Please call if you have any questions or require further information at 207-775-6345.

Best regards,

Larry J. Kennedy
Treasurer

Enclosure

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91 MAY -6 PM12:37

BEFORE THE FEDERAL ELECTION COMMISSION

SENSITIVE

In the Matter of)

Rolde for U.S. Senate Campaign)
and Larry J. Kennedy, as treasurer)

MUR 3184

GENERAL COUNSEL'S REPORT

I. BACKGROUND

Attached is a conciliation agreement which has been signed by Larry J. Kennedy, the treasurer of Rolde for U.S. Senate Campaign.

The attached agreement contains no changes from the agreement approved by the Commission on March 11, 1991.

II. RECOMMENDATIONS

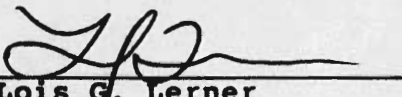
1. Accept the attached conciliation agreement with Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer.
2. Close the file in this matter.
3. Approve the appropriate letter.

Lawrence M. Noble
General Counsel

Date

5/3/91

BY:


Lois G. Lerner
Associate General Counsel

Attachment
Conciliation Agreement

Staff Assigned: Tamara Kapper

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of)
)
Rolde for U.S. Senate Campaign)
and Larry J. Kennedy, as treasurer.) MUR 3184

CERTIFICATION

I, Marjorie W. Emmons, Secretary of the Federal Election Commission, do hereby certify that on May 8, 1991, the Commission decided by a vote of 6-0 to take the following actions in MUR 3184:

1. Accept the conciliation agreement with Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer, as recommended in the General Counsel's Report dated May 3, 1991.
2. Close the file in this matter.
3. Approve the appropriate letter, as recommended in the General Counsel's Report dated May 3, 1991.

Commissioners Aikens, Elliott, Josefiak, McDonald, McGarry, and Thomas voted affirmatively for the decision.

Attest:

5-9-91
Date

Marjorie W. Emmons
Marjorie W. Emmons
Secretary of the Commission

Received in the Secretariat: Mon., May 6, 1991 12:37 p.m.
Circulated to the Commission: Mon., May 6, 1991 4:00 p.m.
Deadline for vote: Wed., May 8, 1991 4:00 p.m.

dr

91040842486



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

May 20, 1991

CLOSED

Estelle A. Lavoie, Esquire
Preti, Flaherty, Beliveau & Pachios
443 Congress Street
Portland, ME 04101

RE: MUR 3184
Rolde for U.S. Senate
Campaign and Larry J.
Kennedy, as treasurer

Dear Ms. Lavoie:

On May 8, 1991, the Federal Election Commission accepted the signed conciliation agreement submitted on your clients' behalf in settlement of a violation of 2 U.S.C. § 434(a)(6), a provision of the Federal Election Campaign Act of 1971, as amended. Accordingly, the file has been closed in this matter.

Please be advised that payment of the civil penalty is due within 30 days from the date that the conciliation agreement becomes effective.

This matter will become a part of the public record within 30 days. If you wish to submit any factual or legal materials to appear on the public record, please do so within ten days. Such materials should be sent to the Office of the General Counsel. Please be advised that information derived in connection with any conciliation attempt will not become public without the written consent of the respondent and the Commission. See 2 U.S.C. § 437g(a)(4)(B). The enclosed conciliation agreement, however, will become a part of the public record.

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Estelle A. Lavoie, Esq.
Page 2

Enclosed you will find a copy of the fully executed conciliation agreement for your files. If you have any questions, please contact Tamara Kapper, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,

Lawrence M. Noble
General Counsel



BY: Lois G. Lerner
Associate General Counsel

Enclosure
Conciliation Agreement

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of)
) MUR 3184
Rolde for U.S. Senate Campaign)
and Larry J. Kennedy, as treasurer)

CONCILIATION AGREEMENT

9 1 0 4 0 3 4 2 4 8 9
This matter was initiated by the Federal Election Commission ("Commission"), pursuant to information ascertained in the normal course of carrying out its supervisory responsibilities. The Commission found reason to believe that Rolde for U.S. Senate Campaign and Larry J. Kennedy, as treasurer ("Respondents") violated 2 U.S.C. § 434(a)(6).

NOW, THEREFORE, the Commission and the Respondents, having participated in informal methods of conciliation, prior to a finding of probable cause to believe, do hereby agree as follows:

I. The Commission has jurisdiction over the Respondents and the subject matter of this proceeding, and this agreement has the effect of an agreement entered pursuant to 2 U.S.C. § 437g(a)(4)(A)(i).

II. Respondents have had a reasonable opportunity to demonstrate that no action should be taken in this matter.

III. Respondents enter voluntarily into this agreement with the Commission.

IV. The pertinent facts in this matter are as follows:

1. Neil Rolde was a candidate for the U.S. Senate in the June 12, 1990 Primary Election from the state of Maine. Rolde for U.S. Senate Campaign is the authorized principal campaign committee for Mr. Rolde's 1990 senatorial campaign.

2. Larry J. Kennedy is the treasurer of Rolde for U.S. Senate Campaign.

3. The Federal Election Campaign Act of 1971, as amended (the "Act"), requires principal campaign committees of candidates for federal office to notify either the Secretary of the Senate or the Commission, in writing, of each contribution totaling \$1,000 or more received by any authorized committee of the candidate after the 20th day but more than 48 hours before any election. 2 U.S.C. § 434(a)(6)(A). The Act further requires this notification to be made within 48 hours after the receipt of the contribution and to include the name of the candidate and the office sought by the candidate, identification of the contributor, the date of receipt and the amount of the contribution. Id. The notification of these contributions shall be in addition to all other reporting requirements.

2 U.S.C. § 434(a)(6)(B).

4. Pursuant to 2 U.S.C. § 431(8)(a) a "contribution" is defined as any gift, subscription, loan, advance, or deposit of money or anything of value made by any person for the purpose of influencing any election for Federal office.

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5. The Act defines a person as including an individual, partnership, committee, association, corporation, labor organization, or any other organization or group of persons. 2 U.S.C. § 431(11).

6. Pursuant to 2 U.S.C. § 431(13) the "identification" of an individual includes disclosing the name, mailing address, and occupation of each individual, as well as the name of their employer; and in the case of any other person, the full name and mailing address.

7. Respondents received two (2) contributions totaling \$63,000 that were received after the 20th day but more than 48 hours before the primary election.

8. On the 1990 July Quarterly Report, respondents disclosed the receipt of a \$61,000 contribution from Neil R. Rolde on May 30, 1990. Respondents were required to file a 48-Hour Notice for this contribution no later than June 1, 1990.

9. On the 1990 July Quarterly Report, respondents disclosed the receipt of a \$2,000 contribution from Neil R. Rolde on June 8, 1990. Respondents were required to file a 48-Hour Notice for this contribution no later than June 10, 1990.

10. The contributions listed in subparagraphs 8 and 9 above were not disclosed until the Committee filed its 1990 July Quarterly Report, which was not received by the Commission until July 12, 1990.

11. On August 21, 1990 the Committee filed a late 48

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hour notice of the May 30, 1990 contribution from Mr. Rolde.

V. Respondents failed to file two (2) 48-Hour Notices within 48 hours of receipt in violation of 2 U.S.C. § 434(a)(6).

VI. Respondents will pay a civil penalty to the Federal Election Commission in the amount of two thousand one hundred dollars (\$2,100), pursuant to 2 U.S.C. § 437g(a)(5)(A).

VII. The Commission, on request of anyone filing a complaint under 2 U.S.C. § 437g(a)(1) concerning the matter at issue herein or on its own motion, may review compliance with this agreement. If the Commission believes that this agreement or any requirement thereof has been violated, it may institute a civil action for relief in the United States District Court for the District of Columbia.

VIII. This agreement shall become effective as of the date that all parties hereto have executed same and the Commission has approved the entire agreement.

IX. Respondents shall have no more than 30 days from the date this agreement becomes effective to comply with and implement the requirement contained in this agreement and to so notify the Commission.

X. This Conciliation Agreement constitutes the entire agreement between the parties on the matters raised herein, and no other statement, promise, or agreement, either written or


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oral, made by either party or by agents of either party, that is not contained in this written agreement shall be enforceable.

FOR THE COMMISSION:

Lawrence M. Noble
General Counsel

BY:


Lois G. Lerner
Associate General Counsel

Date

5/20/91

FOR THE RESPONDENT:


Larry J. Bernick
Treasurer Polls for Senate Campaign
(Name)
(Position)

Date

4/22/91

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FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

THIS IS THE END OF MUR # 3184

DATE FILMED 5/24/91 CAMERA NO. 4

CAMERA MAN AS

91040842494



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

THE FOLLOWING DOCUMENTATION IS ADDED TO

THE PUBLIC RECORD IN CLOSED MUR 3184.

7/31/91

91040855245

PROFF, FLAHERTY, BELIVEAU & PACIOS

ATTORNEYS AT LAW

AUGUSTA OFFICE
46 MEMORIAL CIRCLE
P.O. BOX 180
AUGUSTA, MAINE 04333-1800
(207) 623-2167
TELEFAX (207) 623-2944

440 CONGRESS STREET
PORTLAND, MAINE 04101-3990

(207) 775-0883
TELEFAX (207) 775-6884



JOHN J. FLAHERTY
ALBERT J. BELIVEAU, JR.
SEVERIN M. BELIVEAU
BAROLD C. PACIOS
MICHAEL J. GENTILE
RICHARD H. SPENCER, JR.
KEITH A. POWERS
CHRISTOPHER D. NYHAN
ERIC P. STAUFFER
JONATHAN S. FRYER
DANIEL RAPAPORT

JOHN F. DOYLE, JR.
BRUCE C. GERRITY
ANTHONY W. SUTTON
JEFFREY T. EDWARDS
ROBERT CHECKOWAY
MICHAEL G. HUNTER-CHEMIST
RANDALL B. WHEEL
JAMES C. PITNEY, JR.
EVAN M. MANNEN
VIRGINIA E. DAVIS
EDWARD B. BENJAMIN, JR.
LEONARD M. GULINO

ESTELLE A. LAVOIE
GEOFFREY S. CUMMINGS
MICHAEL L. SHEEHAN
JOY C. CANNYRELL
SUZAN E. LOGUDICE
NORRIS B. BURNS
WELSON J. LARKINS
MICHAEL KAPLAN
STEPHEN E. F. LANGSDORF
JAMES E. PHIPPS
JAMES T. COHN
JOHN P. McVEIGH

MARILYN S. MINTRETTA
ELIZABETH A. OLIVIER
CRAIG T. BEING
DAVID L. HALGAY, JR.
ANN E. ROBINSON
SUZAN E. LIVINGSTON
DEIRDRE M. O'CALLAGHAN
JOSEPH G. DONAHUE
CLAUDIA D. RASCHLER
JILL PELLETIER ALLEN
SUZAN E. KELLEY

OF COUNSEL

ROBERT F. PRETI
ROBERT W. SMITH
DAVID B. VAN DYKE (Admitted to D.C. Bar only)

June 14, 1991

BY CERTIFIED MAIL

Tamara Kapper, Esq.
Office of General Counsel
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: In the Matter of Rolde for U.S. Senate Campaign and
Larry J. Kennedy, Treasurer, FEC Proceeding #MUR 3184

Dear Tamara:

I enclose herewith a check in the amount of \$2,100.00 made payable to the Federal Election Commission in payment of the civil penalty required in the Conciliation Agreement signed by our respective clients.

I trust this now concludes all matters relating to the above-captioned proceeding.

Thank you for your assistance in clarifying those matters which are part of the public record and generally for your helpfulness throughout this process.

Very truly yours,

Estelle A. Lavoie
Estelle A. Lavoie

Enclosure
cc: Barbara Holt

EAL/78306.AB8

91 JUN 17 AM 11:45

91 JUN 18 PM 3:28

RECEIVED
FEDERAL ELECTION COMMISSION
JUN 14 1991



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

June 18, 1991

TWO WAY MEMORANDUM

TO: Fabrae Brunson
OGC, Docket

FROM: Philomena Brooks *PB*
Accounting Technician

SUBJECT: Account Determination for Funds Received

We recently received a check from Nail Rolde
for U.S. Senate, check number 2016, dated
June 13, 1991, and in the amount of \$ 2,100.00.
Attached is a copy of the check and any correspondence that
was forwarded. Please indicate below the account into which
it should be deposited, and the MUR number and name.

TO: Philomena Brooks
Accounting Technician

FROM: Fabrae Brunson *PB*
OGC, Docket

In reference to the above check in the amount of
\$ 2,100, the MUR number is 3184 and in the name of
Rolde for Senate Campaign. The account into
which it should be deposited is indicated below:

☐ Budget Clearing Account (OGC), 95F3875.16

☒ Civil Penalties Account, 95-1099.160

☐ Other: _____

Fabrae D. Brunson
Signature

6/18/91
Date

21040355247

NEIL ROLDE for U.S. SENATE

(207) 775-6345
75 MARKET ST., P.O. BOX 1179
PORTLAND, ME 04104

DATE	INVOICE	AMOUNT

52-5/112

2016

PAY
AMOUNT OF

Two Thousand One Hundred and 00/100

DOLLARS

DATE	CK. NO.	TO THE ORDER OF	GROSS AMT.	PAYMENT DESCRIPTION	DISC.	NET AMOUNT
6/27/16	2016	Federal Election Commission	2100.00			2100.00
				FICA	FED. TAX	ST. TAX

MAINE NATIONAL BANK - PORTLAND, MAINE 04104

[Signature]

⑈002915⑈ 6031300054⑈ 0125⑈ 521 9⑈