

**Political Organization
Report of Contributions and Expenditures**

OMB No 1545-1696

▶ See separate instructions

A For the period beginning January 1, 2003 and ending June 30, 2003

B Check applicable boxes Initial report Change of address Amended report Final report

1 Name of organization **AMFPAC (Alliance for Maine's Future Political Action Committee)** Employer identification number **01 0546419**

2 Mailing address (P O Box or number street, and room or suite number)
1015 Main Street

City or town state and ZIP code
Readfield, ME 04355

3 E-mail address of organization **info@allianceformaine.org** 4 Date organization was formed **March 29, 2002**

5a Name of custodian of records **Larry Pullen** 5b Custodian's address **PO Box 1090
Auburn, ME 04211**

6a Name of contact person **Joe Edwards** 6b Contact person's address **1015 Main Street
Readfield, ME 04355**

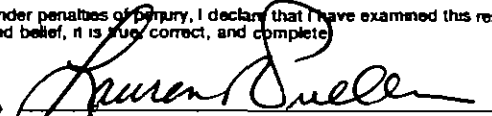
7 Business address of organization (if different from mailing address shown above) Number, street, and room or suite number
Same as Above
City or town state, and ZIP code

8 Type of report (check only one box)

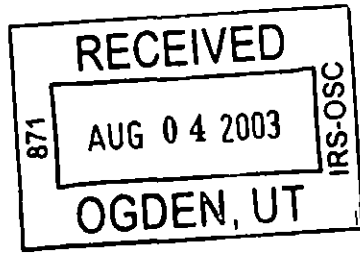
- a First quarterly report (due by April 15)
- b Second quarterly report (due by July 15)
- c Third quarterly report (due by October 15)
- d Year-end report (due by January 31)
- e Mid-year report (Non-election year only-due by July 31)
- f Monthly report for the month of _____ (due by the 20th day following the month shown above, except the December report, which is due by January 31)
- g Pre-election report (due by the 12th or 15th day before the election)
 - (1) Type of election _____
 - (2) Date of election _____
 - (3) For the state of _____
- h Post-general election report (due by the 30th day after general election)
 - (1) Date of election _____
 - (2) For the state of _____

9 Total amount of reported contributions (total from all attached Schedules A).	9	0.00
10 Total amount of reported expenditures (total from all attached Schedules B)	10	0.00

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here  Signature of authorized official Date 7-31-03

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Schedule A Itemized Contributions	Schedule A page <input type="text"/> of <input type="text"/>
Name of organization <input style="width:95%;" type="text"/>	Employer identification number <input style="width:50%;" type="text"/>

Contributor's name mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
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	Contributor's occupation	
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	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Contributor's name mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date <input type="text"/> ▶ \$ <input type="text"/>	
Subtotal of contributions reported on this page only Enter here and also include this amount in the total on line 9 of Form 8872 <input style="width:95%;" type="text"/>		\$ <input style="width:50%;" type="text"/>

Schedule B Itemized Expenditures		Schedule B page 1 of 1
Name of organization AMFPAC		Employer identification number 01 0546419
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Subtotal of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872		\$ <u> </u>