



Angela Holmes, City Clerk  
City of Westbrook  
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## 2024 Campaign Finance Report For Municipal Candidates

| Name of Candidate:  | Anthony Dahms  |                                  | <input type="checkbox"/> Check if any information has changed from previous report |
|---|--|----------------------------------|--|
| Street Address:   | 113 Brackett Street  |                                  |  |
| City and ZIP:   | Westbrook 04092  | Phone Number:<br>207-632-2679    |  |
| Email:  | dahmsanthony@gmail.com   |                                  |  |
| Office Sought:  | Ward 3 City Council  | District Number (if applicable): |  |
| Name of Treasurer:  | Anthony Dahms  |                                  | <input type="checkbox"/> Check if any information has changed from previous report |
| Mailing Address:  | 113 Brackett Street  |                                  |  |
| City and ZIP:   | Westbrook 04092  | Phone Number:<br>207-632-2679    |  |
| Email:  | dahmsanthony@gmail.com   |                                  |  |
| Report Name   | Filing Period  | Filing Deadline                  |  |
| <input type="checkbox"/> January Semiannual   | 07/01/2023 – 12/31/2023  | 01/16/2024                       |  |
| <input type="checkbox"/> 11-Day Pre-June Election   | If filing first report:<br>Beginning of campaign – 05/28/2024<br>OR<br>If January Semiannual filed:<br>01/01/2024 – 05/28/2024   | 05/31/2024                       |  |
| <input type="checkbox"/> 42-Day Post-June Election  | 05/29/2024 – 07/16/2024  | 07/23/2024                       |  |
| <input type="checkbox"/> July Semiannual  | 01/01/2024 – 06/30/2024  | 07/15/2024                       |  |
| <input checked="" type="checkbox"/> 11-Day Pre-Nov. Election  | If filing first report:<br>Beginning of campaign – 10/22/2024<br>OR<br>If 2023 July Semiannual filed:<br>07/01/2024 – 10/22/2024 | 10/25/2024                       |  |
| <input type="checkbox"/> 42-Day Post-Nov. Election  | 10/23/2024 – 12/10/2024  | 12/17/2024                       |  |
| <input type="checkbox"/> Amendment to:  |  |                                  |  |
| <input type="checkbox"/> Other (specify):   |  |                                  |  |
| <input type="checkbox"/> Check if campaign had not activity for the reporting period. (No other pages are required) |  |                                  |  |

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

  
Treasurer Signature

10/25/2024  
Date

  
Candidate Signature

10/25/2024  
Date

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

**SCHEDULE A**  
**CASH CONTRIBUTIONS**

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

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

**Contributor Types**

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

| Date Received  | Contributor's Name, Address, Zip                          | Occupation               | Employer                            | Type | Amount |
|--|---|--------------------------|-------------------------------------|------|--------|
| 8/23/24  | Anthony Dahms, 113 Brackett Street<br>Westbrook, ME 04092 | Recreation<br>Director   | Town of Gray                        | 1    | \$110  |
| 8/24/24  | Robin Dahms, 101 E Valentine St<br>Westbrook, ME 04092    | Admin<br>Coordinator     | Town of<br>Scarborough              | 2    | \$575  |
| 8/31/24  | John Hilton, 16 Lawrence St<br>Westbrook, ME 04092        | Information<br>Requested | Information<br>Requested            | 2    | \$250  |
| 9/5/24   | David Marcia, 148 Dorothy St<br>Portland, ME 04103        | Retired                  | Retired                             | 2    | \$100  |
| 9/7/24   | Colleen Hilton, 6 Reynolds St<br>South Portland, ME 04106 | President                | Northen Light<br>Homecare & Hospice | 2    | \$400  |
| 9/16/24  | Contributors giving \$50 or less                          | N/A                      | N/A                                 | 7    | \$50   |
| 10/7/24  | Paul Profenno, 934 Main St<br>Westbrook, ME 04092         | Owner                    | Profennos                           | 2    | \$250  |
|  |   |                          |                                     |      |        |
|  |   |                          |                                     |      |        |
|  |   |                          |                                     |      |        |
|  |   |                          |                                     |      |        |
| <b>Total Cash Contributions (this page only) →</b><br>(combined totals from all Schedule A pages must be listed on Schedule F, Line 1) |   |                          |                                     |      | \$1735 |

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

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

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

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

**Contributor Types**

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

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

## SCHEDULE B EXPENDITURES

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

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

### EXPENDITURE TYPES

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

| Date     | Name of Payee    | Type | Remark      | Amount   |
|----------|------------------|------|-------------|----------|
| 9/5/24   | Full Court Press | LIT  | Car Magnets | \$204.75 |
| 9/6/24   | TD Bank          | OTH  | Monthly Fee | \$10     |
| 9/6/24   | Full Court Press | LIT  | Yard Signs  | \$495.19 |
| 9/23/24  | Full Court Press | LIT  | Palm Cards  | \$200.81 |
| 9/23/24  | TD Bank          | OTH  | Monthly Fee | \$10     |
| 10/12/24 | Amazon           | HRD  | Sign Stakes | \$26.36  |

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

\$947.11

**SCHEDULE C**  
**LOANS AND LOANS REPAYMENT**

- List all new and continuing loans that were unpaid at any time during this reporting period.
- If a loan amount is forgiven, the amount forgiven must also be entered as a contribution on Schedule A.
- Loans cannot exceed \$575 in any election for municipal candidates, except loans made by the candidate, the candidate's spouse or domestic partner, or a financial institution in the State of Maine
- Duplicate as needed.

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

**SCHEDULE D**  
**UNPAID DEBTS and OBLIGATIONS**

- You have incurred a debt or obligation if you have placed an order for a good or service without making a payment; made a promise or agreement to pay for a good or service; signed a contract for a good or service; and received delivery of a good or service for which you have not paid.
- If the campaign has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- Report actual payments to vendors on Schedule B.
- Duplicate as needed.

**SCHEDULE F**  
**SUMMARY SCHEDULE**

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

**CASH ACTIVITY**

**Receipts**

|  |        |
|--|--------|
| 1. Cash Contributions this Period (total of all Schedule A pages)            | \$1735 |
| 2. Loans this Period (Schedule C, column 2)                                  | 0      |
| 2.a. Adjustment for Forgiven Loan Amount this Period (Schedule C, column 4)* | - 0    |
| 3. Other Cash Receipts this Period (interest, etc.)                          | 0      |
| 4. Total Receipts this Period [(lines 1 + 2 + 3) – line 2.a.]                | \$1735 |

**Expenditures**

|   |          |
|---|----------|
| 5. Expenditures this Period (total of all Schedule B pages) | \$947.11 |
| 6. Loan Repayments this Period (Schedule C, column 3)       | 0        |
| 7. Total Payments this Period (lines 5 + 6)                 | \$947.11 |

**OTHER ACTIVITY THIS REPORTING PERIOD**

|  |   |
|--|---|
| 8. In-kind Contributions this Period (total of all Schedule A-1 pages)   | 0 |
| 9. Total Unpaid Debts at Close of Period (total of all Schedule D pages) | 0 |
| 10. Total Loan Balance at Close of Period (Schedule C, column 5)         | 0 |

**CASH SUMMARY FOR PERIOD**

|  |            |
|--|------------|
| 11. Cash Balance at Beginning of Period (Schedule F, line 14 from last report) | \$1735     |
| 12. <b>Plus</b> Total Receipts this Period (line 4 above)                      | + 0        |
| 13. <b>Minus</b> Total Payments this Period (line 7 above)                     | - \$947.11 |
| 14. Cash Balance at End of Period (must match reconciled bank account balance) | = \$787.89 |

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