



Emily Scully, CCM  
 City Clerk/Registrar of Voters  
 City of South Portland  
 25 Cottage Road  
 South Portland, ME 04106  
 ecarrington@southportland.org  
 P: (207) 767-7627 | F: (207) 767-7620

## REGISTRATION: POLITICAL ACTION COMMITTEE

A political action committee must register with the municipality within 7 days of making expenditures to initiate or influence a campaign or election, including unpaid obligations, that total more than:

- \$1,500 for an organization whose major purpose is to influence candidate or ballot question elections, or
- \$5,000 for organizations which participate in candidate elections but whose major purpose is something other than influencing candidate elections.

Registration is not complete until the following additional documents have been submitted:

- Initial Campaign Finance Report. All contributions received, whether cash or in-kind, and all expenditures made from the beginning of the calendar year must be reported. Be sure to include any expenditures associated with the collection of signatures, paid staff time, travel reimbursement, and fundraising.
- Acknowledgement of Responsibilities. The Treasurer, Principal Officer and any Decision Maker(s) must sign and return the statement within 10 days of the date of this registration.

Is this an amendment?  Yes  No

ALL SECTIONS OF THIS FORM MUST BE COMPLETED.

COMMITTEE INFORMATION	
COMMITTEE NAME	Neighbors for Neighborhoods
MAILING ADDRESS	542 Ocean Street
CITY, STATE, ZIP CODE	South Portland, ME 04106
EMAIL	neighbors4neighborhoodsopo@gmail.com
ALTERNATE EMAIL 1	linda.zweigoron@gmail.com
ALTERNATE EMAIL 2	jeff.steinbrink@fandm.edu
WEB ADDRESS	

TREASURER INFORMATION	
FIRST NAME	Linda
MIDDLE NAME	
LAST NAME	Zweigoron
MAILING ADDRESS	542 Ocean Street
CITY, STATE, ZIP CODE	South Portland, ME 04106
EMAIL	linda.zweigoron@gmail.com
ROLE (check all that apply)	Treasurer

PRINCIPAL OFFICER INFORMATION	
FIRST NAME	Jeff
MIDDLE NAME	
LAST NAME	Steinbrink
MAILING ADDRESS	492 Cottage Rd.
CITY, STATE, ZIP CODE	South Portland, ME 04106
EMAIL	jeff.steinbrink@fandm.edu
ROLE (check all that apply)	President

**DESIGNATED FILING AGENT(S) (OPTIONAL)**

FIRST NAME Linda MIDDLE NAME LAST NAME Zweigoron  
EMAIL lindazweigoron@gmail.com PHONE 307-650-9575

**PRIMARY FUNDRAISERS & DECISION MAKERS**

Identify the primary fundraisers and decision makers for the committee and whether they are also a Legislator or candidate. (Use additional sheets as necessary.)

FIRST NAME Jeff MIDDLE NAME LAST NAME Steinbrink

EMAIL jeff.steinbrink@fandm.edu

ROLE (check all that apply)  Fundraiser  Decision Maker  Legislator  Candidate

FIRST NAME Melanie MIDDLE NAME LAST NAME WIKER

EMAIL mwiker@msn.com

ROLE (check all that apply)  Fundraiser  Decision Maker  Legislator  Candidate

**FORM OF ORGANIZATION**

Name the form or structure of organization (i.e., cooperative, corporation, voluntary association, partnership, etc.)

FORM OF ORGANIZATION PAC DATE OF ORIGIN OR INCORPORATION 9/6/18

**FOUNDING ORGANIZATIONS**

Was this committee formed by one or more for-profit or non-profit corporations or organizations? (Use additional sheets as necessary.)

IF YES, NAME OF CORPORATION OR ORGANIZATION

Yes ADDRESS

No CITY, STATE, ZIP CODE

PHONE

**COMMITTEE ACCOUNT INFORMATION**

NAME ON ACCOUNT Neighbors for Neighborhoods

NAME OF FINANCIAL INSTITUTION Evergreen Cr. Union MAILING ADDRESS (STREET, CITY, STATE, ZIP CODE) 799 Broadway, S.P.Hd., ME

**STATEMENT OF SUPPORT OR OPPOSITION**

Indicate the specific candidate(s) or category of candidate(s), ballot question(s), referenda, initiated petition(s), people's vetoes, or other campaign(s) the committee supports or opposes. If the committee is formed to influence the election of a single candidate, the name of the candidate must be listed. (Use additional sheets as necessary.)

Referendum question on  
Regulating Short Term Rentals

- Support
- Oppose
- Support
- Oppose

**SIGNATURE OF PRINCIPAL OFFICER OR TREASURER**

The Principal Officer, Treasurer and any Decision Maker(s) must submit a signed Acknowledgement of Responsibilities.

NAME OF SIGNER Linda Zweigoron TITLE Treasurer

SIGNATURE [Signature] DATE 9/19/18

**IMPORTANT NOTICE:**

An initial campaign finance report must be filed with the municipality at the time of registration.



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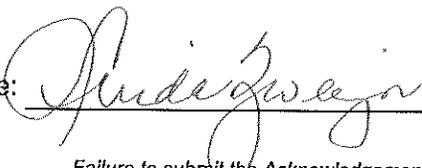
## ACKNOWLEDGMENT OF RESPONSIBILITIES — TREASURER

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I, Luida Zweigoron, acknowledge that I am the treasurer of  
(Printed Name)  
Neighbors for Neighborhoods, a political action committee registered with  
(Name of Committee)  
the City of Portland (the "Municipality"). I acknowledge that, as the treasurer of the committee:

- (1) I am jointly responsible with the principal officer for ensuring that the committee complies with the requirements of Maine Election Law (21-A M.R.S.A., chapter 13) applicable to the committee. These requirements include but are not limited to:
  - filing complete and accurate reports as required by the Municipality;
  - ensuring that the treasurer of the committee keeps all required records of contributions, expenditures and bank statements for the committee's campaign account; and
  - updating the committee's registration information within 10 days of any change, including the resignation or removal of the principal officer or a decision maker and filing an updated registration with the Municipality by March 1<sup>st</sup> of every year in which there is a general election.
- (2) I am jointly and severally liable with the treasurer and the committee for any penalties assessed against the committee for violations of Maine Election Law (21-A M.R.S.A., chapters 13 and 14).
- (3) I am deemed to have participated in any spending decisions of the committee until the Municipality has received notice of my resignation or involuntary removal from the committee.
- (4) I am responsible for notifying the Municipality and the committee's treasurer in writing if I resign from the position of treasurer and that my resignation will not be effective until the Municipality receives such notice.
- (5) The committee is responsible for notifying the Municipality if the principal officer or a decision maker is involuntarily removed from the committee.

I have read this acknowledgment and understand my responsibilities and liabilities as treasurer.

Signature: 

Date: 9/19/18

*Failure to submit the Acknowledgement of Responsibilities may result in a fine of \$100.*



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## ACKNOWLEDGMENT OF RESPONSIBILITIES — PRINCIPAL OFFICER

I, Jeff Steinbrink, acknowledge that I am the principal officer  
(Printed Name)  
of Neighbors for Neighborhoods, a political action committee registered with  
(Name of Committee)  
the City of Portland (the "Municipality"). I acknowledge that, as the principal officer of the committee:

(1) I am jointly responsible with the treasurer for ensuring that the committee complies with the requirements of Maine Election Law (21-A M.R.S.A., chapter 13) applicable to the committee. These requirements include but are not limited to:

- filing complete and accurate reports as required by the Municipality;
- ensuring that the treasurer of the committee keeps all required records of contributions, expenditures and bank statements for the committee's campaign account; and
- updating the committee's registration information within 10 days of any change, including the resignation or removal of the treasurer or a decision maker and filing an updated registration with the Municipality by March 1<sup>st</sup> of every year in which there is a general election.

(2) I am jointly and severally liable with the treasurer and the committee for any penalties assessed against the committee for violations of Maine Election Law (21-A M.R.S.A., chapters 13 and 14).

(3) I am deemed to have participated in any spending decisions of the committee until the Municipality has received notice of my resignation or involuntary removal from the committee.

(4) I am responsible for notifying the Municipality and the committee's treasurer in writing if I resign from the position of principal officer and that my resignation will not be effective until the Municipality receives such notice.

(5) The committee is responsible for notifying the Municipality if the treasurer or a decision maker is involuntarily removed from the committee.

I have read this acknowledgment and understand my responsibilities and liabilities as principal officer.

Signature: \_\_\_\_\_

Jeff Steinbrink

Date: \_\_\_\_\_

9/19/18

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## ACKNOWLEDGMENT OF RESPONSIBILITIES — DECISION MAKER

I, Melanie Wiker, acknowledge that I am a decision maker of  
(Printed Name)  
Neighbors for Neighborhoods, a political action committee registered with the  
(Name of Committee)  
City of Portland (the "Municipality"). I acknowledge that, as a decision maker of the committee:

- (1) I am deemed to have participated in any spending decisions of the committee until the Municipality has received notice of my resignation or involuntary removal from the committee.
- (2) I am responsible for notifying the Municipality and the committee in writing if I resign from the position of decision-maker and that my resignation will not be effective until the Municipality receives such notice.

I have read this acknowledgment and understand my responsibilities as a decision maker.

Signature: Melanie Wiker

Date: 9/19/18

*Failure to submit the Acknowledgement of Responsibilities may result in a fine of \$100.*