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Sue Cote, City Clerk
City of Sanford
919 Main Street, Sanford ME, 04073

Email: shcote@sanfordmaine.org
Phone: (207) 324-9125
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2023 Campaign Finance Report

For Municipal Candidates

Name of Candidate:	Victor E. DiGregorio		<input type="checkbox"/> Check if any information has changed from previous report
Street Address:	197 West View DR.		
City and ZIP:	Sanford, ME. 04073	Phone Number:	(207) 324-4224
Email:	Ø		
Office Sought:	Ø	District Number (if applicable):	
Name of Treasurer:	Victor E. DiGregorio		<input type="checkbox"/> Check if any information has changed from previous report
Mailing Address:	197 West View Drive		
City and ZIP:	Sanford, ME. 04073	Phone Number:	
Email:			
TYPE OF REPORT		DUE DATE	DATES OF REPORTING PERIOD
<input checked="" type="checkbox"/> 11-Day Pre-June Election		June 2, 2023	Beginning of campaign – May 30, 2023
<input type="checkbox"/> 42-Day Post-June Election		July 25, 2023	May 31 – July 18, 2023
<input type="checkbox"/> July Semiannual		July 17, 2023	January 1 – June 30, 2023
<input type="checkbox"/> 11-Day Pre-November Election		October 27, 2023	July 19 – October 24, 2023
<input type="checkbox"/> 42-Day Post-November Election		December 19, 2023	October 25 – December 12, 2023
<input type="checkbox"/> January Semiannual		January 16, 2024	July 1 – December 31, 2023
<input type="checkbox"/> Amendment to:			
<input type="checkbox"/> Other (specify):			
<input type="checkbox"/> Check if campaign had no 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.

Victor E. DiGregorio
Treasurer Signature

10/24
Date

Victor E. DiGregorio
Candidate Signature

10/24
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 Other Candidates and Committees |
| 2 Other Individuals | 6 Contributors giving \$50 or less |
| 3 Political Action Committees | 7 Transfer from previous campaign |
| 4 Political Party Committees | |

Date Received	Contributor's Name, Address, Zip	Occupation	Employer	Type	Amount
9/13/23	Victor E. DiGasperio 197 West View Drive SANFORD, MAINE 04073	POLITICAL CANDIDATE	"SELF- EMPLOYED"	1	2,000
10/13/23	VICTOR E. DiGasperio 197 West View Dr. SANFORD, ME 04073	POLITICAL CANDIDATE	SELF EMPLOYED	1	4,110

Total Cash Contributions (this page only) → **3,110**
(combined totals from all Schedule A pages must be listed on Schedule F, Line 1)

**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 medial and online advertising only	WEB	Website and internet costs (website domain and registration, etc.)

Date	Name of Payee	Type	Remark	Amount
9/13	Peter Edwards RSD GRAPHER	PRO + LIT	✓	324.94
10/13	Peter Edwards RSD GRAPHER	PRO + LIT	✓	962.16
10/05	BURAP SIGNS	LIT + PRO	✓	280.00
10/16	Peter Edwards FAMILY DOLLAR	POS	✓	6.22
10/16	ROGERS SUPA DOLLA SHAWNS/OSCO	FOD	✓	109.26 10.01
10/16	KA PLAN STRATEGIES	PRO + PHO	✓	1,200.00

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

\$ 2,788.59
1.00



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VICTOR E DIGREGORIO
197 WESTVIEW DR
SANFORD ME 04073-4213

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VICTOR E DIGREGORIO

000776 1/2

ACCOUNT SUMMARY

Beginning Balance	2,000.00	Average Collected Balance	753.47
Deposits	1,110.00	Interest Earned This Period	0.00
Electronic Payments	2,909.45	Interest Paid Year-to-Date	0.00
Other Withdrawals	100.00	Annual Percentage Yield Earned	0.00%
Ending Balance	100.55	Days in Period	30

	Total for this cycle	Total Year to Date
Grace Period OD/NSF Refund	\$0.00	\$0.00

DAILY ACCOUNT ACTIVITY

Deposits

POSTING DATE	DESCRIPTION	AMOUNT
10/13	DEPOSIT	10.00
10/13	DEPOSIT	100.00
10/13	DEPOSIT	1,000.00
Subtotal:		1,110.00

Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
09/27	DBCRD PUR AP, *****72010975867, AUT 092623 VISA DDA PUR AP RSD GRAPHICS EAST WATERBOR * ME	324.94
09/29	DBCRD PUR AP, *****72010975867, AUT 092823 VISA DDA PUR AP RSD GRAPHICS EAST WATERBOR * ME	962.16
10/05	DBCRD PUR AP, *****72010975867, AUT 100423 VISA DDA PUR AP SQ BURPEE SIGNS 877 417 4551 * ME	280.00
10/06	DBCRD PUR AP, *****72010975867, AUT 100523 VISA DDA PUR AP FAMILY DOLLAR 2984 SANFORD * ME	e M/s - 6.22
10/10	DBCRD PUR AP, *****72010975867, AUT 100623 VISA DDA PUR AP ROGER S SUPA DOLLA SANFORD * ME	* M/s - 9.26
10/10	DBCRD PUR AP, *****72010975867, AUT 100723 VISA DDA PUR AP * KOHL'S CHARGE PAYMENT 800 564 5740 * WI	116.86 MISTAKE
10/16	DBCRD PUR AP, *****72010975867, AUT 101223 VISA DDA PUR AP SHAW'S OSCO 4560 SANFORD * ME	* M/s - 10.01
10/16	DBCRD PUR AP, *****72010975867, AUT 101323 VISA DDA PUR AP WPY KAPLAN STRATEGIES IN 855 999 3729 * FL	1,200.00

Subtotal: ~~2,909.45~~

2,788.59

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