



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Together PAC Inc

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		227491.77
(b) Cash on Hand at Beginning of Reporting Period.....	227491.77	
(c) Total Receipts (from Line 19) .....	301561.42	575741.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	529053.19	803233.19
7. Total Disbursements (from Line 31).....	280269.65	326957.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	248783.54	476275.31
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
**Together PAC Inc**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	239315.96	493865.96
(ii) Unitemized .....	1315.00	1945.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	240630.96	495810.96
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	60500.00	79500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	301130.96	575310.96
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	430.46	430.46
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	301561.42	575741.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	301561.42	575741.42

**DETAILED SUMMARY PAGE**

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	269269.65	304957.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	269269.65	304957.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	11000.00	17000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	11000.00	22000.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	280269.65	326957.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	280269.65	326957.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	301130.96	575310.96
34. Total Contribution Refunds (from Line 28(d)) .....	11000.00	22000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	290130.96	553310.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	269269.65	304957.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	430.46	430.46
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	268839.19	304527.42

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Jose E Almeida</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2011 <b>Transaction ID : C7482281</b>
Mailing Address 12 Jeffrey Dr		Amount of Each Receipt this Period 5000.00
City North Attleboro	State MA	Zip Code 02760-2758
FEC ID number of contributing federal political committee. C		
Name of Employer Covidien	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Marsha C Alperin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011 <b>Transaction ID : C7491736</b>
Mailing Address 72 Rockport Rd		Amount of Each Receipt this Period 2500.00
City Weston	State MA	Zip Code 02493-1450
FEC ID number of contributing federal political committee. C		
Name of Employer At home	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Myer M Alperin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011 <b>Transaction ID : C7491735</b>
Mailing Address 35 Oakford Glen Rd		Amount of Each Receipt this Period 2500.00
City Clarks Summit	State PA	Zip Code 18411
FEC ID number of contributing federal political committee. C		
Name of Employer Alperin, Inc	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Joseph W Alsop**

Mailing Address PO Box 76  
16 Thissell St

City Prides Crossing State MA Zip Code 01965-0076

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2011  
**Transaction ID : C7208372**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**B. Karen Keating Ansara**

Mailing Address PO Box 502

City Essex State MA Zip Code 01929-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Community Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2011  
**Transaction ID : C7208374**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Stever H Aubrey**

Mailing Address 35 Westfield St

City Dedham State MA Zip Code 02026-5626

FEC ID number of contributing federal political committee. **C**

Name of Employer Dovetail Health Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482278**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Peter H Barry**

Mailing Address 99 Woodbridge Ter

City South Hadley State MA Zip Code 01075-1134

FEC ID number of contributing federal political committee. **C**

Name of Employer Bulkley, Richardson & Gelinas Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387308**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**B. Ilene R Baylinson**

Mailing Address 4717 Linnean Ave NW

City Washington State DC Zip Code 20008-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer Maximus Occupation President, Eastern Division, Health Se

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491752**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Donald E Bowen Jr.**

Mailing Address 46 Skytop Rd

City Ipswich State MA Zip Code 01938-1478

FEC ID number of contributing federal political committee. **C**

Name of Employer Meridian Associates Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2011  
**Transaction ID : C729796**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Garrett Bradley**

Mailing Address 774 Main St

City Hingham State MA Zip Code 02043-3630

FEC ID number of contributing federal political committee. **C**

Name of Employer Thornton & Naumes Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2011  
**Transaction ID : C7134357**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. John F Burke**

Mailing Address 260 Lyman Rd

City Milton State MA Zip Code 02186-4773

FEC ID number of contributing federal political committee. **C**

Name of Employer Staples, Inc. Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482275**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. David M Casey**

Mailing Address 115 McIntosh Dr

City Bristol State CT Zip Code 06010-3020

FEC ID number of contributing federal political committee. **C**

Name of Employer Maximus Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491749**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 148  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Bruce L Caswell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10221 Montgomery Ave  
 City Kensington State MD Zip Code 20895-3326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Maximus Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491751**  
 Amount of Each Receipt this Period  
 1000.00

**B. Herbert G Chambers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 259 McGrath Hwy  
 City Somerville State MA Zip Code 02143-3417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Automobile Dealership Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011  
**Transaction ID : C7272058**  
 Amount of Each Receipt this Period  
 5000.00

**C. Karen J Chandler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 True Rd  
 City Salisbury State MA Zip Code 01952-1426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Plank Road Realty, LLC Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2011  
**Transaction ID : C7279794**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Howard Cohen</b>		Date of Receipt
Mailing Address 150 Federal St FI 5		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
City	State	Zip Code
Boston	MA	02110-1745
FEC ID number of contributing federal political committee.		Transaction ID : <b>C7491730</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Beacon Communities LLC	President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Susanna Colloredo-Mansfield</b>		Date of Receipt
Mailing Address 46 Winthrop St		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
City	State	Zip Code
South Hamilton	MA	01982-1323
FEC ID number of contributing federal political committee.		Transaction ID : <b>C7208378</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Name of Employer	Occupation	
At Home	Homemaker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. John M Connors Jr</b>		Date of Receipt
Mailing Address 200 Clarendon St FI 60		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
City	State	Zip Code
Boston	MA	02116-5339
FEC ID number of contributing federal political committee.		Transaction ID : <b>C7482266</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. John Connors**  
Full Name (Last, First, Middle Initial)

Mailing Address 521 Far Reach Rd

City Westwood State MA Zip Code 02090-1089

FEC ID number of contributing federal political committee. **C**

Name of Employer Boathouse Group Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482280**

Amount of Each Receipt this Period  
5000.00

**B. Paul E Dinino**  
Full Name (Last, First, Middle Initial)

Mailing Address 9216 Levelle Dr.

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Cornerstone Occupation Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2011  
**Transaction ID : C7569389**

Amount of Each Receipt this Period  
500.00

**C. Lisa J Drapkin**  
Full Name (Last, First, Middle Initial)

Mailing Address 37 Putnam Ave

City Cambridge State MA Zip Code 02139-2925

FEC ID number of contributing federal political committee. **C**

Name of Employer Coldwell Banker Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482268**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Fred P Duval**  
Full Name (Last, First, Middle Initial)

Mailing Address 208 W Portland St Ste 159

City Phoenix	State AZ	Zip Code 85003-5454
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Duval & Associates	Occupation Consultant
--	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

**Transaction ID : C7387379**

Amount of Each Receipt this Period  
500.00

**B. William G Finard**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 Arlington St

City Boston	State MA	Zip Code 02116-3402
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Finard & Company	Occupation Partner
--------------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

**Transaction ID : C7491739**

Amount of Each Receipt this Period  
2500.00

**C. Len Fishman**  
Full Name (Last, First, Middle Initial)

Mailing Address 7500 Great Meadow Rd

City Dedham	State MA	Zip Code 02026-4092
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Hebrew Senior Life	Occupation CEO
--	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

**Transaction ID : C7491733**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Colleen Fitzgibbon**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Nortons Pt

City Manchester State MA Zip Code 01944-1432

FEC ID number of contributing federal political committee. **C**

Name of Employer At Home Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2011

**Transaction ID : C7279790**

Amount of Each Receipt this Period  
1000.00

**B. David Fubini**  
Full Name (Last, First, Middle Initial)

Mailing Address 80 Sears Rd

City Brookline State MA Zip Code 02445-7428

FEC ID number of contributing federal political committee. **C**

Name of Employer McKinsey & Co Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011

**Transaction ID : C7482277**

Amount of Each Receipt this Period  
3000.00

**C. James E Geraghty Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Preservation Way

City Westford State MA Zip Code 01886-4230

FEC ID number of contributing federal political committee. **C**

Name of Employer Morgan Stanley Occupation Private Wealth Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011

**Transaction ID : C7405378**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Robert W Gilbert Jr.**

Mailing Address 33 Bretton Rd

City West Springfield State MA Zip Code 01089-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer Dowd Insurance Agency Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387318**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**B. Theresa M Gilman**

Mailing Address 72 Wilkin Dr

City Longmeadow State MA Zip Code 01106-2034

FEC ID number of contributing federal political committee. **C**

Name of Employer Economy Insurance Occupation Insurance Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387321**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**C. Daniel R Gomez**

Mailing Address 4870 28th St S

City Arlington State VA Zip Code 22206-1366

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491748**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Gary L Gottlieb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Huntington Ave  
 Apt 803  
 City Boston State MA Zip Code 02116-5751  
 Name of Employer Partners Healthcare Inc Occupation Physician/Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 5000.00

Date of Receipt 09 / 15 / 2011  
**Transaction ID : C7279787**  
 Amount of Each Receipt this Period 5000.00

**B. Paul H Guzzi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39 Rochester Rd  
 City Newton State MA Zip Code 02458-2517  
 Name of Employer Greater Boston Chamber of Commerce Occupation President & CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 5000.00

Date of Receipt 10 / 24 / 2011  
**Transaction ID : C7482282**  
 Amount of Each Receipt this Period 5000.00

**C. Dorothy L Harrington**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Bayview Ave  
 City Beverly State MA Zip Code 01915-4719  
 Name of Employer At home Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 06 / 2011  
**Transaction ID : C7405375**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11000.00  
**TOTAL** This Period (last page this line number only)..... ▶





**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)  
**Together PAC Inc**

**A. James H Hodges**  
Full Name (Last, First, Middle Initial)

Mailing Address 2940 Wheat St.

City Columbia State SC Zip Code 29205

FEC ID number of contributing federal political committee. **C**

Name of Employer Landmark Health Solutions Occupation Health Care Executive

Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2011  
**Transaction ID : C7522677**

Amount of Each Receipt this Period  
 1000.00

**B. Anthony Paul Hollings**  
Full Name (Last, First, Middle Initial)

Mailing Address 53 Woburn St

City Medford State MA Zip Code 02155-3439

FEC ID number of contributing federal political committee. **C**

Name of Employer Landmark Health Solutions Occupation Health Care Executive

Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491727**

Amount of Each Receipt this Period  
 250.00

**C. Katherine A Howard**  
Full Name (Last, First, Middle Initial)

Mailing Address 84 Fenwick Rd

City Waban State MA Zip Code 02468-2228

FEC ID number of contributing federal political committee. **C**

Name of Employer Hebrew Senior Life Occupation Finance Manager

Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491729**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Jerry L Johnson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1075 Green Valley Rd  
City State Zip Code  
Bryn Mawr PA 19010-1911  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Heffler, Rodetich & Saitta, LLC Executive  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
4440.96

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2011  
**Transaction ID : C7482538**  
Amount of Each Receipt this Period  
4440.96  
\* In-Kind: In-kind: Catering Expense

**B. John E Kavanagh III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12 Long Ridge Ln  
City State Zip Code  
Ipswich MA 01938-3015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Kavanagh Advisory Group CEO  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2011  
**Transaction ID : C7279797**  
Amount of Each Receipt this Period  
1000.00

**c. John E Kavanagh III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12 Long Ridge Ln  
City State Zip Code  
Ipswich MA 01938-3015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Kavanagh Advisory Group CEO  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2011  
**Transaction ID : C7405369**  
Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6440.96
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. John E Kavanagh III**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 Long Ridge Ln

City Ipswich State MA Zip Code 01938-3015

FEC ID number of contributing federal political committee. **C**

Name of Employer Kavanagh Advisory Group Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 14 / 2011  
Transaction ID : C7491726

Amount of Each Receipt this Period  
-1000.00

**B. Thomas L Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 1326 N Central Ave Unit 409

City Phoenix State AZ Zip Code 85004-1758

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna, Inc. Occupation Head of Medicaid Segment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 06 / 2011  
Transaction ID : C7405360

Amount of Each Receipt this Period  
1000.00

**C. Vicki R Kennedy**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 Madison Ave Rm 280

City New York State NY Zip Code 10017-5044

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 23 / 2011  
Transaction ID : C7387371

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. McFall Kerbey III</b>		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 <b>Transaction ID : C7387365</b>
Mailing Address 97 Bartlett St Unit 2		Amount of Each Receipt this Period 5000.00
City Somerville	State MA	Zip Code 02145-2611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Telecommunications Insight Group	Occupation Senior Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Frederic Krastin</b>		Date of Receipt MM / DD / YYYY 11 / 16 / 2011 <b>Transaction ID : C7522968</b>
Mailing Address PO Box 2290		Amount of Each Receipt this Period 2000.00
City Springfield	State MA	Zip Code 01101-2290
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Welder Mortgage Co.	Occupation office manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>c. Marc LaCasse</b>		Date of Receipt MM / DD / YYYY 10 / 24 / 2011 <b>Transaction ID : C7482269</b>
Mailing Address 250 W 3rd St Unit 5		Amount of Each Receipt this Period 1000.00
City Boston	State MA	Zip Code 02127-1339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The McCormack Firm LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Elizabeth S Loring**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 218  
 573 Hale St  
 City Prides Crossing State MA Zip Code 01965-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unemployed Occupation Fundraiser  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2011  
**Transaction ID : C7272056**  
 Amount of Each Receipt this Period  
 1000.00  
 Aggregate Year-to-Date ▼  
 1000.00

**B. Peter B Loring**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 218  
 573 Hale St  
 City Prides Crossing State MA Zip Code 01965-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Loring Wolcoot & Coolidge Office Occupation Private Trustee  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2011  
**Transaction ID : C7272055**  
 Amount of Each Receipt this Period  
 1000.00  
 Aggregate Year-to-Date ▼  
 1000.00

**C. Jane M Malone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 803  
 City Westfield State MA Zip Code 01086-0803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Partners for Community Occupation Social Services Director  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387300**  
 Amount of Each Receipt this Period  
 500.00  
 Aggregate Year-to-Date ▼  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Hinda L Marcus**

Mailing Address 208 Allandale Rd

City Chestnut Hill State MA Zip Code 02467

FEC ID number of contributing federal political committee. **C**

Name of Employer: Arnold Industries Occupation: President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 21 / 2011**

**Transaction ID : C7531670**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Vincent J Mariano Jr.**

Mailing Address 16 Gerrard Ave

City East Longmeadow State MA Zip Code 01028-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer: EMA Dental Occupation: Dental Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 23 / 2011**

**Transaction ID : C7387293**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Vincent J Mariano Jr.**

Mailing Address 16 Gerrard Ave

City East Longmeadow State MA Zip Code 01028-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer: EMA Dental Occupation: Dental Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 23 / 2011**

**Transaction ID : C7387331**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 148  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Richard A Montoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9317 Morison Ln  
 City State Zip Code  
 Great Falls VA 22066-4153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Maximus CEO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491750**  
 Amount of Each Receipt this Period  
 1000.00

**B. John D Motto**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 86 Hale St  
 City State Zip Code  
 West Springfield MA 01089-1507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Partners for Community CFO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387299**  
 Amount of Each Receipt this Period  
 500.00

**C. Edward M Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39 San Souci Dr  
 City State Zip Code  
 South Hadley MA 01075-1378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 First American Insurance Agent  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387311**  
 Amount of Each Receipt this Period  
 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00  
**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Jeffrey L Musman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 Trimountain Rd  
 City Nahant State MA Zip Code 01908-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Seyfarth Shaw Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2011  
**Transaction ID : C7279783**  
 Amount of Each Receipt this Period 1000.00

**B. Elizabeth G Nabel MD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Yarmouth Rd  
 City Chestnut Hill State MA Zip Code 02467-2800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Partners Healthcare Inc Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2011  
**Transaction ID : C7272057**  
 Amount of Each Receipt this Period 5000.00

**C. Daniel O'Connell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 Clarendon St Apt 7W  
 City Boston State MA Zip Code 02116-5279  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Massachusetts Competetive Partnerships Occupation President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 23 / 2011  
**Transaction ID : C7387289**  
 Amount of Each Receipt this Period 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)  
**Together PAC Inc**

**A. Thomas A O'Donnell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 80 Washington Sq  
 City Salem State MA Zip Code 01970-4034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Henry S. O'Donnell & Sons Inc. Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2011  
**Transaction ID : C7279803**  
 Amount of Each Receipt this Period  
 1000.00

**B. Andrew S Offit**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1429 Commonwealth Ave  
 City West Newton State MA Zip Code 02465-2829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wellington Management Occupation Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491731**  
 Amount of Each Receipt this Period  
 2500.00

**C. Peter J Petas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 463 Commercial St  
 City Provincetown State MA Zip Code 02657-2315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CreditSights Occupation President/COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2011  
**Transaction ID : C7405366**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Perri C. Petricca**

Mailing Address **PO Box 1145**

City <b>Pittsfield</b>	State <b>MA</b>	Zip Code <b>01202-1145</b>
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Petricca Industries</b>	Occupation <b>CEO</b>
--	--------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**07 / 26 / 2011**

**Transaction ID : C7134354**

Amount of Each Receipt this Period  
**2000.00**

Full Name (Last, First, Middle Initial)  
**B. Mary Jean Picknelly**

Mailing Address **333 Ardsley Rd**

City <b>Longmeadow</b>	State <b>MA</b>	Zip Code <b>01106-2507</b>
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Peter Pan Bus Lines</b>	Occupation <b>Executive</b>
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**09 / 23 / 2011**

**Transaction ID : C7387305**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**C. Paul C Picknelly**

Mailing Address **1 Monarch Pl  
FI 25**

City <b>Springfield</b>	State <b>MA</b>	Zip Code <b>01144-4013</b>
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Monarch Enterprises</b>	Occupation <b>President</b>
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**09 / 23 / 2011**

**Transaction ID : C7387315**

Amount of Each Receipt this Period  
**2000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Peter A Picknelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 Park Dr

City Springfield State MA Zip Code 01106-1234

FEC ID number of contributing federal political committee. **C**

Name of Employer Peter Pan Bus Lines Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : C7387316**

Amount of Each Receipt this Period  
2000.00

**B. Frank R Podany**  
Full Name (Last, First, Middle Initial)

Mailing Address 1941 1st Ave S Ste 3A

City Seattle State WA Zip Code 98134-1437

FEC ID number of contributing federal political committee. **C**

Name of Employer iconGroupe Advertising Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : C7387325**

Amount of Each Receipt this Period  
2000.00

**C. Richard L Purinton**  
Full Name (Last, First, Middle Initial)

Mailing Address 36 Main St Box 242

City Byfield State MA Zip Code 01922-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2011

**Transaction ID : C7279785**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Spencer L Purinton**

Mailing Address 61 High St

City Newburyport State MA Zip Code 01950-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer RPI Apex Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011  
**Transaction ID : C7405372**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Alesandra F Quagliata De Vaca**

Mailing Address 120 Larch Rd

City Cambridge State MA Zip Code 02138-3317

FEC ID number of contributing federal political committee. **C**

Name of Employer Hebrew Senior Life Occupation Chief Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2011  
**Transaction ID : C7497993**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Mary Ann Ann Quinson**

Mailing Address 1115 5th Ave Apt 14C

City New York State NY Zip Code 10128-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Efforts Occupation Best Efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2011  
**Transaction ID : C7134352**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Eleanor Mason Ramsey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2955 Avalon Avenue  
City Berkeley State CA Zip Code 94705  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mason Tillman Associates Occupation President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **11 / 09 / 2011**  
**Transaction ID : C7498619**  
Amount of Each Receipt this Period **1000.00**

**B. Maggie Rivera**  
Full Name (Last, First, Middle Initial)  
Mailing Address 131 Dowd Ct  
City Ludlow State MA Zip Code 01056-1744  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Morkan Kaylee Corp Occupation Real Estate Executive  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 23 / 2011**  
**Transaction ID : C7387297**  
Amount of Each Receipt this Period **500.00**

**C. Murray Sackman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 391 Highland St  
City West Newton State MA Zip Code 02465  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Consulting financial Services Occupation financings & business services  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.00**

Date of Receipt **12 / 20 / 2011**  
**Transaction ID : C7565012**  
Amount of Each Receipt this Period **500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **2000.00**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. James P Sadowsky</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 23 / 2011 <b>Transaction ID : C7387307</b>
Mailing Address 7 Pendleton Ln		Amount of Each Receipt this Period 2000.00
City Longmeadow	State MA	Zip Code 01106-2570
FEC ID number of contributing federal political committee. C	Name of Employer Williams Distributing Company	Occupation Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Robert J Schreiber MD</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2011 <b>Transaction ID : C7497992</b>
Mailing Address 27 Bartlet St		Amount of Each Receipt this Period 250.00
City Andover	State MA	Zip Code 01810-3810
FEC ID number of contributing federal political committee. C	Name of Employer Robert J. Schreiber, MD	Occupation Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Benjamin Schwartz</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 <b>Transaction ID : C7565013</b>
Mailing Address 71 Lockes Village Road		Amount of Each Receipt this Period 500.00
City Wendell	State MA	Zip Code 01379
FEC ID number of contributing federal political committee. C	Name of Employer benjamin schwartz	Occupation Self Employed
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 148  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. David W Scudder**

Mailing Address 248 Argilla Rd

City Ipswich State MA Zip Code 01938-2647

FEC ID number of contributing federal political committee. **C**

Name of Employer Aureus Asset Management Occupation Investments

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2011  
**Transaction ID : C7272054**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Arthur I Segel**

Mailing Address 118 Dean Rd

City Brookline State MA Zip Code 02445-4212

FEC ID number of contributing federal political committee. **C**

Name of Employer Harvard Business School Occupation Professor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482283**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**c. Laura J Sen**

Mailing Address 90 Babcock St

City Brookline State MA Zip Code 02446-5900

FEC ID number of contributing federal political committee. **C**

Name of Employer BJ's Wholesale Club Occupation Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482276**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Thomas A Shields**  
Full Name (Last, First, Middle Initial)  
Mailing Address 45 Satuit Meadow Ln  
City Norwell State MA Zip Code 02061-1455  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Shields Health Care Group Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
10 / 06 / 2011  
**Transaction ID : C7405380**  
Amount of Each Receipt this Period  
5000.00

**B. Thomas F Shields**  
Full Name (Last, First, Middle Initial)  
Mailing Address 220 Boylston St Apt 1209  
City Boston State MA Zip Code 02116-3950  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Shields Healthcare Group Occupation CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
10 / 06 / 2011  
**Transaction ID : C7405381**  
Amount of Each Receipt this Period  
5000.00

**C. Samuel Slater**  
Full Name (Last, First, Middle Initial)  
Mailing Address 220 boylston street #1208  
City boston State MA Zip Code 02116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tremont Asset Management LLC Occupation Real Estate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
12 / 20 / 2011  
**Transaction ID : C7565014**  
Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 15000.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Barry R Sloane**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 247

City Barrington State RI Zip Code 02806-0247

FEC ID number of contributing federal political committee. **C**

Name of Employer Century Bank Occupation banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011

**Transaction ID : C7491734**

Amount of Each Receipt this Period  
 2500.00

**B. Kenneth Michael Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 295 Osprey Point Dr

City Osprey State FL Zip Code 34229-9250

FEC ID number of contributing federal political committee. **C**

Name of Employer Jobs for America's Graduates Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011

**Transaction ID : C7482274**

Amount of Each Receipt this Period  
 1000.00

**C. Susan L Stubbs**  
Full Name (Last, First, Middle Initial)

Mailing Address 13 Trumbull Rd

City Northampton State MA Zip Code 01060-3013

FEC ID number of contributing federal political committee. **C**

Name of Employer ServiceNet Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : C7387301**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Melissa Bayer Tearney</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2011 <b>Transaction ID : C7491732</b>
Mailing Address 12 Fairmont St		Amount of Each Receipt this Period 2500.00
City Cambridge	State MA	Zip Code 02139-4421
FEC ID number of contributing federal political committee. C		
Name of Employer Nixon Peabody	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Henry M Thomas III</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 23 / 2011 <b>Transaction ID : C7387304</b>
Mailing Address 105 Marengo Park		Amount of Each Receipt this Period 1000.00
City Springfield	State MA	Zip Code 01108-1735
FEC ID number of contributing federal political committee. C		
Name of Employer Urban League	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Carole Thompson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 26 / 2011 <b>Transaction ID : C7134355</b>
Mailing Address 37 Harvard St		Amount of Each Receipt this Period 250.00
City Worcester	State MA	Zip Code 01609-2850
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Carole Thompson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 37 Harvard St  
City Worcester State MA Zip Code 01609-2850  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **450.00**

Date of Receipt **11 / 09 / 2011**  
**Transaction ID : C7497994**  
Amount of Each Receipt this Period **200.00**

**B. William J Tinti**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16 Beckford St  
City Salem State MA Zip Code 01970  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tinti, Quinn, Grover & Frey, PC Occupation Attorney  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 06 / 2011**  
**Transaction ID : C7405376**  
Amount of Each Receipt this Period **1000.00**

**C. Paul C Trane**  
Full Name (Last, First, Middle Initial)  
Mailing Address 70 E Emerson St  
City Melrose State MA Zip Code 02176-3543  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Telecommunications Insight Group Occupation Principal  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **5000.00**

Date of Receipt **09 / 23 / 2011**  
**Transaction ID : C7387359**  
Amount of Each Receipt this Period **5000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **6200.00**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)  
**Together PAC Inc**

**A. Eric E Van Loon**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 Marthas Point Rd

City Concord	State MA	Zip Code 01742-4943
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Mediator/Arbitrator
-----------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2011

**Transaction ID : C7208379**

Amount of Each Receipt this Period  
1000.00

**B. Mary D Wasserman**  
Full Name (Last, First, Middle Initial)

Mailing Address 193 Argilla Rd

City Ipswich	State MA	Zip Code 01938-2614
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer North Shore Community College	Occupation Adjunct Faculty
---	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2011

**Transaction ID : C7208375**

Amount of Each Receipt this Period  
1000.00

**C. William S Wasserman Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 193 Argilla Rd

City Ipswich	State MA	Zip Code 01938-2614
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2011

**Transaction ID : C7208377**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Barry Weiner**  
Full Name (Last, First, Middle Initial)

Mailing Address 90 Apple St

City Essex State MA Zip Code 01929-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer Rubrto Israel & Weiner PC Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011  
**Transaction ID : C7405370**

Amount of Each Receipt this Period  
 1000.00

**B. David Wilson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3213 Avalon Dr

City Wilmington State MA Zip Code 01887-1161

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482267**

Amount of Each Receipt this Period  
 1000.00

**C. Bruce Young**  
Full Name (Last, First, Middle Initial)

Mailing Address 88 Elliot St #405

City Springfield State MA Zip Code 01105

FEC ID number of contributing federal political committee. **C**

Name of Employer Partners for Community Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011  
**Transaction ID : C7387296**

Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2400.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Stanley R R Zanarotti**

Mailing Address 170 Gore St  
Apt 302

City Cambridge State MA Zip Code 02141-1146

FEC ID number of contributing federal political committee. **C**

Name of Employer Dimensional Insight Occupation Entrepreneur

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482273**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Paul Brontas**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451-2337

FEC ID number of contributing federal political committee. **C**

Name of Employer Deval Patrick Committee Occupation Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2011  
**Transaction ID : C7482286A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : C7482286AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. David Fubini**  
Full Name (Last, First, Middle Initial)

Mailing Address 80 Sears Rd

City Brookline State MA Zip Code 02445-7428

FEC ID number of contributing federal political committee. **C**

Name of Employer McKinsey & Co Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 02 / 2011  
Transaction ID : **C7264183A**

Amount of Each Receipt this Period  
2000.00

\* Earmarked Contribution: See Below

**B. ActBlue**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
08 / 25 / 2011  
Transaction ID : **C7264183AB**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Carol Fulp**  
Full Name (Last, First, Middle Initial)

Mailing Address 54 Commonwealth Avenue, apt 1

City Boston State MA Zip Code 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer John Hancock Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
07 / 31 / 2011  
Transaction ID : **C7208383A**

Amount of Each Receipt this Period  
4000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2011

**Transaction ID : C7208383AB**

Amount of Each Receipt this Period  
4000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. John Harrington**

Mailing Address 10 Strathmore Rd

City Wakefield	State MA	Zip Code 01880-1420
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Lawyer
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : C7387409A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : C7387409AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Danielle Heanue**

Mailing Address 70 E Emerson St

City Melrose State MA Zip Code 02176-3543

FEC ID number of contributing federal political committee. **C**

Name of Employer Telecom Insight Grp Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 15 / 2011  
Transaction ID : **C7387407A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
09 / 23 / 2011  
Transaction ID : **C7387407AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**C. William Lang**

Mailing Address 8 Eastern Ave

City Stoneham State MA Zip Code 02180-1310

FEC ID number of contributing federal political committee. **C**

Name of Employer N/a Occupation College student

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
08 / 28 / 2011  
Transaction ID : **C7272063A**

Amount of Each Receipt this Period  
275.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5275.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2011  
**Transaction ID : C7272063AB**

Amount of Each Receipt this Period  
275.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Rebecca A. Lee**

Mailing Address 1 Nassau Street Apt. 2109

City Boston State MA Zip Code 02111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Edwards Wildman Palmer LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2011  
**Transaction ID : C7522585A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2011  
**Transaction ID : C7522585AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Lawrence Lucchino**

Mailing Address 8405 Greensboro Drive - Suite 700

City McLean	State VA	Zip Code 22102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Boston Red Sox	Occupation President/CEO
------------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2011

**Transaction ID : C7491755A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

**Transaction ID : C7491755AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**C. Ashley McCown**

Mailing Address 86 Ripley Street

City Newton	State MA	Zip Code 02449
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Solomon McCown & Company, inc.	Occupation President
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2011

**Transaction ID : C7532152A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
54280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 22 / 2011

**Transaction ID : C7532152AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. James McGrail**

Mailing Address 82 Lowder St

City Dedham	State MA	Zip Code 02026-4206
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Lawyer
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2011

**Transaction ID : C7387408A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : C7387408AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. Siobhan Mee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 337 Hayward Mill Road  
 City State Zip Code  
 Concord MA 01742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Bingham McCutchen LLP Attorney  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2011  
**Transaction ID : C7498006A**  
 Amount of Each Receipt this Period  
 250.00  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 382110  
 City State Zip Code  
 Cambridge MA 02238-2110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2011  
**Transaction ID : C7498006AB**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C. Jonathan Mellin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 273 Brookside Drive  
 City State Zip Code  
 New London NH 03257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Connors LLC CFO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2011  
**Transaction ID : C7405383A**  
 Amount of Each Receipt this Period  
 5000.00  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011

**Transaction ID : C7405383AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Jeffrey Robbins**

Mailing Address 76 Shade St

City Lexington State MA Zip Code 02421-7721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mintz Levin Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : C7405384A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011

**Transaction ID : C7405384AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Sara Schnorr**

Mailing Address 11 Oak St  
Unit 26

City Wellesley State MA Zip Code 02482-4731

FEC ID number of contributing federal political committee. **C**

Name of Employer Edwards Wildman Palmer LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 10 / 2011  
**Transaction ID : C7482287A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
10 / 24 / 2011  
**Transaction ID : C7482287AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**C. Benjamin Schwartz**

Mailing Address 71 Lockes Village Road

City Wendell State MA Zip Code 01379

FEC ID number of contributing federal political committee. **C**

Name of Employer benjamin schwartz Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
11 / 03 / 2011  
**Transaction ID : C7498007A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2011  
**Transaction ID : C7498007AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Benjamin Schwartz**

Mailing Address 71 Lockes Village Road

City State Zip Code  
Wendell MA 01379

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
benjamin schwartz Self Employed

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : C7555399A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2011  
**Transaction ID : C7555399AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Michael Sheehan**

Mailing Address 53 State Street

City Boston State MA Zip Code 02109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hill Holliday Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 24 / 2011  
Transaction ID : **C7272061A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
09 / 08 / 2011  
Transaction ID : **C7272061AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**c. Marsha Simon**

Mailing Address 3500 Tilden Street NW

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MJ Simon & Company Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
12 / 22 / 2011  
Transaction ID : **C7569602A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2011

**Transaction ID : C7569602AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Helene Solomon**

Mailing Address 216 Summit Avenue

City Brookline State MA Zip Code 02446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Solomon McCown & Company, Inc. CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2011

**Transaction ID : C7532151A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 22 / 2011

**Transaction ID : C7532151AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Lillian Topol**

Mailing Address 33 Commonwealth Avenue

City Boston State MA Zip Code 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2011

**Transaction ID : C7208382A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 10 / 2011

**Transaction ID : C7208382AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**C. Lillian Topol**

Mailing Address 33 Commonwealth Avenue

City Boston State MA Zip Code 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2011

**Transaction ID : C7272062A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2011  
**Transaction ID : C7272062AB**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B. Michael Wasserman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Gloucester Street  
 City Boston State MA Zip Code 02115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Michael P. Wasserman, Inc. meeting & event planner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2011  
**Transaction ID : C7491754A**  
 Amount of Each Receipt this Period  
 1000.00  
 \* Earmarked Contribution: See Below

**C. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 45280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : C7491754AB**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	239315.96

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. CGI TECHNOLOGIES AND SOLUTIONS INC. PAC**

Mailing Address 11325 Random Hills Rd

City Fairfax	State VA	Zip Code 22030-6051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354241

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

**Transaction ID : C7491737**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. COZEN O'CONNOR POLITICAL ACTION COMMITTEE**

Mailing Address 1900 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2011

**Transaction ID : C7258173**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. IBEW COPE**

Mailing Address 900 Seventh St. NW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2011

**Transaction ID : C7566340**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address 555 12th St NW  
Ste 660

City Washington State DC Zip Code 20004-1241

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2011

**Transaction ID : C7272060**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 PARKWAY DRIVE

City HANOVER State MD Zip Code 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2011

**Transaction ID : C7497987**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Ironworkers Political Action League

Mailing Address 1750 New York Ave NW  
Ste 400

City Washington State DC Zip Code 20006-5315

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 22 / 2011

**Transaction ID : C7566342**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Johnson and Johnson Plz  
 City New Brunswick State NJ Zip Code 08933-0001  
 FEC ID number of contributing federal political committee. **C** C00010983  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 15 / 2011  
**Transaction ID : C7279768**  
 Amount of Each Receipt this Period 1500.00

**B. LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 905 16TH ST., N.W. SECOND FLOOR  
 City WASHINGTON State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00007922  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 29 / 2011  
**Transaction ID : C7570426**  
 Amount of Each Receipt this Period 5000.00

**C. MAXIMUS INC POLITICAL ACTION COMMITTEE (MAXPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11419 SUNSET HILLS ROAD  
 City RESTON State VA Zip Code 20190  
 FEC ID number of contributing federal political committee. **C** C00343707  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2011  
**Transaction ID : C7264064**  
 Amount of Each Receipt this Period 3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9500.00  
**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. MAXIMUS INC POLITICAL ACTION COMMITTEE (MAXPAC)**

Mailing Address 11419 SUNSET HILLS ROAD

City	State	Zip Code
RESTON	VA	20190

FEC ID number of contributing federal political committee. **C** C00343707

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2011

**Transaction ID : C7482284**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**B. NextEra Energy, Inc. PAC**

Mailing Address PO Box 14000

City	State	Zip Code
North Palm Beach	FL	33408-0420

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2011

**Transaction ID : C7199901**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. PFIZER INC. PAC**

Mailing Address 235 EAST 42ND STREET

City	State	Zip Code
NEW YORK	NY	10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2011

**Transaction ID : C7550317**

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A.** Full Name (Last, First, Middle Initial)  
POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT, AFL-CIO

Mailing Address 815 16TH ST., NW, SUITE 600

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003160

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

**Transaction ID : C7491745**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Raytheon PAC

Mailing Address 1100 Wilson Blvd  
Ste 1500

City Arlington	State VA	Zip Code 22209-3900
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2011

**Transaction ID : C7134356**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Ave NW

City Washington	State DC	Zip Code 20006-5305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

**Transaction ID : C7491744**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. SNR Denton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 <b>Transaction ID : C7569401</b>
Mailing Address 1301 K STREET NW SUITE 600 EAST TOWER		Amount of Each Receipt this Period 1000.00
City WASHINGTON State DC Zip Code 20005	FEC ID number of contributing federal political committee. <b>C C00216127</b>	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

Full Name (Last, First, Middle Initial) <b>B. UA Political Education Committee</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 <b>Transaction ID : C7566341</b>
Mailing Address 3 Park Place		Amount of Each Receipt this Period 5000.00
City Annapolis State MD Zip Code 21401	FEC ID number of contributing federal political committee. <b>C C00012476</b>	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Full Name (Last, First, Middle Initial) <b>C. Unite Here Tip</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2011 <b>Transaction ID : C7497991</b>
Mailing Address 275 7TH AVENUE 11TH FLOOR		Amount of Each Receipt this Period 5000.00
City NEW YORK State NY Zip Code 10001	FEC ID number of contributing federal political committee. <b>C C00004861</b>	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 148  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A. US ONCOLOGY INC. GOOD GOVERNMENT COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10101 Woodloch Forest Dr  
 City State Zip Code  
 The Woodlands TX 77380-1975  
 FEC ID number of contributing federal political committee. **C** C00339655  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2011  
**Transaction ID : C7264050**  
 Amount of Each Receipt this Period  
 1000.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	60500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

**A.** Full Name (Last, First, Middle Initial)  
**Deval L Patrick**

Mailing Address 75 Hinckley Rd

City Milton State MA Zip Code 02186-2111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.46

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 20 / 2011

**Transaction ID : C7546438**

Amount of Each Receipt this Period  
230.46

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.46
<b>TOTAL</b> This Period (last page this line number only).....▶	230.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID : D350021**

Amount of Each Disbursement this Period

197.50

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID : D352225**

Amount of Each Disbursement this Period

79.00

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2011

**Transaction ID : D354445**

Amount of Each Disbursement this Period

592.50

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

869.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

### A. ActBlue

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2011			

Transaction ID : D369033

Amount of Each Disbursement this Period

1162.71
---------

Full Name (Last, First, Middle Initial)

### B. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2011			

Transaction ID : D368717

Amount of Each Disbursement this Period

958.39
--------

Full Name (Last, First, Middle Initial)

### C. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2011			

Transaction ID : D368718

Amount of Each Disbursement this Period

53.00
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2174.10
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 27 / 2011

**Transaction ID : D368719**

Amount of Each Disbursement this Period

2609.84

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 07 / 2011

**Transaction ID : D368720**

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

11 / 10 / 2011

**Transaction ID : D368721**

Amount of Each Disbursement this Period

1940.10

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4602.94



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 14 / 2011

**Transaction ID : D368722**

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 25 / 2011

**Transaction ID : D368723**

Amount of Each Disbursement this Period

8346.20

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 25 / 2011

**Transaction ID : D368724**

Amount of Each Disbursement this Period

58.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8457.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2011

**Transaction ID : D368725**

Amount of Each Disbursement this Period

58.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2011

**Transaction ID : D368726**

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2011

**Transaction ID : D368727**

Amount of Each Disbursement this Period

1835.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1946.76

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : D368728**

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : D368729**

Amount of Each Disbursement this Period

1909.69

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2011

**Transaction ID : D368730**

Amount of Each Disbursement this Period

78.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2040.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 21 / 2011

**Transaction ID : D368731**

Amount of Each Disbursement this Period

1482.28

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2011

**Transaction ID : D368732**

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2011

**Transaction ID : D368733**

Amount of Each Disbursement this Period

561.89

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2097.17

### SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

#### A. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2011

**Transaction ID : D368734**

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

#### B. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2011

**Transaction ID : D368735**

Amount of Each Disbursement this Period

1041.26

Full Name (Last, First, Middle Initial)

#### C. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2011

**Transaction ID : D368736**

Amount of Each Disbursement this Period

53.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1147.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll taxes expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2011

**Transaction ID : D368737**

Amount of Each Disbursement this Period

1049.28

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2011

**Transaction ID : D368738**

Amount of Each Disbursement this Period

1033.64

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2011

**Transaction ID : D368739**

Amount of Each Disbursement this Period

1033.65

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3116.57

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

### A. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2011

Transaction ID : D368740

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

### B. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2011

Transaction ID : D368741

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

### C. ADP

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1134

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2011

Transaction ID : D368742

Amount of Each Disbursement this Period

971.64

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1077.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Alipes CME**

Mailing Address 175 Portland St, 5th Fl

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Web Site Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2011

**Transaction ID : D368654**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. Alipes CME**

Mailing Address 175 Portland St, 5th Fl

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Website expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2011

**Transaction ID : D368655**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. Blue Cross Blue Shield**

Mailing Address Box 371318

City Pittsburgh State PA Zip Code 15250-7318

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 17 / 2011

**Transaction ID : D368757**

Amount of Each Disbursement this Period

559.12

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

30559.12



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Blue Cross Blue Shield</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2011
Mailing Address Box 371318		<b>Transaction ID : D368758</b>
City Pittsburgh	State PA	
Purpose of Disbursement Health insurance		Amount of Each Disbursement this Period 2774.87
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Brontas, Paul</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2011
Mailing Address 39 Sheffield Rd		<b>Transaction ID : D368657</b>
City Waltham	State MA	
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 15.25
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Brontas, Paul</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2011
Mailing Address 39 Sheffield Rd		<b>Transaction ID : D368658</b>
City Waltham	State MA	
Purpose of Disbursement Toner		Amount of Each Disbursement this Period 80.73
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	2870.85
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Deposit on Cell Phone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2011

**Transaction ID : D368659**

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Office supplies expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2011

**Transaction ID : D368660**

Amount of Each Disbursement this Period

23.08

Full Name (Last, First, Middle Initial)

**C. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Stamps

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 26 / 2011

**Transaction ID : D368661**

Amount of Each Disbursement this Period

26.50

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

174.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Postage reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2011

**Transaction ID : D368662**

Amount of Each Disbursement this Period

15.25

Full Name (Last, First, Middle Initial)

**B. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Postage expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID : D368663**

Amount of Each Disbursement this Period

13.25

Full Name (Last, First, Middle Initial)

**C. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID : D368664**

Amount of Each Disbursement this Period

81.23

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

109.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Computer expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : D368665**

Amount of Each Disbursement this Period

98.99

Full Name (Last, First, Middle Initial)

**B. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Postage expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : D368666**

Amount of Each Disbursement this Period

13.25

Full Name (Last, First, Middle Initial)

**C. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Postage expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2011

**Transaction ID : D368667**

Amount of Each Disbursement this Period

15.25

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

98.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Brontas, Paul</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2011
Mailing Address 39 Sheffield Rd		<b>Transaction ID : D368668</b>
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Office supplies expense	Amount of Each Disbursement this Period 37.18
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brontas, Paul</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2011
Mailing Address 39 Sheffield Rd		<b>Transaction ID : D368669</b>
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Postage reimbursement	Amount of Each Disbursement this Period 13.25
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cambridge Offset Printing</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2011
Mailing Address 56 Creighton St		<b>Transaction ID : D368762</b>
City Cambridge	State MA	
Zip Code 02140	Purpose of Disbursement Printing expense	Amount of Each Disbursement this Period 499.38
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	549.81
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Cambridge Offset Printing**

Mailing Address 56 Creighton St

City Cambridge State MA Zip Code 02140

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

**Transaction ID : D368763**

Amount of Each Disbursement this Period

180.63

Full Name (Last, First, Middle Initial)

**B. Chick Montana Group, LLC**

Mailing Address 202 Bonham Rd

City Dedham State MA Zip Code 02026-5404

Purpose of Disbursement  
Postage & delivery

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2011

**Transaction ID : D368670**

Amount of Each Disbursement this Period

41.22

Full Name (Last, First, Middle Initial)

**C. Chick Montana Group, LLC**

Mailing Address 202 Bonham Rd

City Dedham State MA Zip Code 02026-5404

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2011

**Transaction ID : D368671**

Amount of Each Disbursement this Period

750.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

971.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Chick Montana Group, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2011
Mailing Address 202 Bonham Rd		<b>Transaction ID : D368672</b>
City Dedham	State MA	
Zip Code 02026-5404	Purpose of Disbursement Accounting and compliance expense	Amount of Each Disbursement this Period 750.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chick Montana Group, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2011
Mailing Address 202 Bonham Rd		<b>Transaction ID : D368673</b>
City Dedham	State MA	
Zip Code 02026-5404	Purpose of Disbursement Accounting and compliance services	Amount of Each Disbursement this Period 750.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Chick Montana Group, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2011
Mailing Address 202 Bonham Rd		<b>Transaction ID : D368674</b>
City Dedham	State MA	
Zip Code 02026-5404	Purpose of Disbursement Accounting & compliance services	Amount of Each Disbursement this Period 750.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Citius**

Mailing Address 20 Clematis Avenue

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Printing Expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2011

**Transaction ID : D368773**

Amount of Each Disbursement this Period

282.92

Full Name (Last, First, Middle Initial)

**B. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2011

**Transaction ID : D368774**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 14 / 2011

**Transaction ID : D368775**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10282.92



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

**Transaction ID : D368776**

Amount of Each Disbursement this Period

33.75

Full Name (Last, First, Middle Initial)

**B. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

**Transaction ID : D368777**

Amount of Each Disbursement this Period

2354.40

Full Name (Last, First, Middle Initial)

**C. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2011

**Transaction ID : D368778**

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

12388.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2011

**Transaction ID : D368779**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Travel expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2011

**Transaction ID : D368780**

Amount of Each Disbursement this Period

501.57

Full Name (Last, First, Middle Initial)

**C. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2011

**Transaction ID : D368781**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10501.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2011

**Transaction ID : D368782**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Colleen M. Turrentine Consulting**

Mailing Address d/b/a Colleen M. Turrentine Consul

City Washington State DC Zip Code 20007-1783

Purpose of Disbursement  
Travel expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2011

**Transaction ID : D368783**

Amount of Each Disbursement this Period

1637.26

Full Name (Last, First, Middle Initial)

**C. Commonwealth of Massachusetts**

Mailing Address 470 Worcester Rd

City Framingham State MA Zip Code 01702

Purpose of Disbursement  
Security and transportation for Gov

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2011

**Transaction ID : D368784**

Amount of Each Disbursement this Period

1312.60

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7949.86

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Commonwealth of Massachusetts</b>		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>14</td> <td></td> <td>2011</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		14		2011
M M M	/	D D D	/	Y Y Y Y Y Y									
11		14		2011									
Mailing Address 470 Worcester Rd		<b>Transaction ID : D368785</b>											
City Framingham	State MA	Zip Code 01702	Amount of Each Disbursement this Period										
Purpose of Disbursement Corporation Annual Report Fee	Category/ Type		15.00										
Candidate Name	Office Sought:												
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For:												
	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Commonwealth of Massachusetts</b>		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>14</td> <td></td> <td>2011</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		14		2011
M M M	/	D D D	/	Y Y Y Y Y Y									
11		14		2011									
Mailing Address 470 Worcester Rd		<b>Transaction ID : D368786</b>											
City Framingham	State MA	Zip Code 01702	Amount of Each Disbursement this Period										
Purpose of Disbursement Security and Transportation	Category/ Type		2983.04										
Candidate Name	Office Sought:												
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For:												
	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Commonwealth of Massachusetts</b>		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>30</td> <td></td> <td>2011</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		30		2011
M M M	/	D D D	/	Y Y Y Y Y Y									
11		30		2011									
Mailing Address 470 Worcester Rd		<b>Transaction ID : D368787</b>											
City Framingham	State MA	Zip Code 01702	Amount of Each Disbursement this Period										
Purpose of Disbursement Security and Transportation for Gov	Category/ Type		91.34										
Candidate Name	Office Sought:												
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For:												
	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3089.38
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Commonwealth of Massachusetts**

Mailing Address 470 Worcester Rd

City Framingham State MA Zip Code 01702

Purpose of Disbursement  
Security and transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 08 / 2011

**Transaction ID : D368788**

Amount of Each Disbursement this Period

938.30

Full Name (Last, First, Middle Initial)

**B. Commonwealth of Massachusetts**

Mailing Address 470 Worcester Rd

City Framingham State MA Zip Code 01702

Purpose of Disbursement  
Security and transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2011

**Transaction ID : D368789**

Amount of Each Disbursement this Period

2978.03

Full Name (Last, First, Middle Initial)

**C. Crawford Strategies, Inc.**

Mailing Address 23 Sunderland Rd

City Arlington State MA Zip Code 02476

Purpose of Disbursement  
Communications consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2011

**Transaction ID : D368675**

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6416.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)  
**A. Crawford Strategies, Inc.**

Mailing Address 23 Sunderland Rd

City State Zip Code  
Arlington MA 02476

Purpose of Disbursement  
communications consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
11 / 09 / 2011

**Transaction ID : D368676**

Amount of Each Disbursement this Period  
2500.00

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Crawford Strategies, Inc.**

Mailing Address 23 Sunderland Rd

City State Zip Code  
Arlington MA 02476

Purpose of Disbursement  
Consulting expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
07 / 12 / 2011

**Transaction ID : D368677**

Amount of Each Disbursement this Period  
2500.00

Category/Type

Full Name (Last, First, Middle Initial)  
**C. Crawford Strategies, Inc.**

Mailing Address 23 Sunderland Rd

City State Zip Code  
Arlington MA 02476

Purpose of Disbursement  
Consulting expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID : D368678**

Amount of Each Disbursement this Period  
2500.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7500.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Crawford Strategies, Inc.**

Mailing Address 23 Sunderland Rd

City State Zip Code  
Arlington MA 02476

Purpose of Disbursement  
Consulting expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 15 / 2011

**Transaction ID : D368679**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Domenic & Company, Inc.**

Mailing Address DBA Union Caterer 9 Quarry St.

City State Zip Code  
Quincy MA 02169

Purpose of Disbursement  
Fundraising - catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 23 / 2011

**Transaction ID : D368796**

Amount of Each Disbursement this Period

1014.36

Full Name (Last, First, Middle Initial)

**C. Goldstein, Alexander J**

Mailing Address 16 Addington Rd #41

City State Zip Code  
Brookline MA 02445

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 31 / 2011

**Transaction ID : D368803**

Amount of Each Disbursement this Period

1513.14

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5027.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Goldstein, Alexander J</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2011
Mailing Address 16 Addington Rd #41		<b>Transaction ID : D368805</b>
City Brookline	State MA	
Purpose of Disbursement salary expense	Candidate Name	Amount of Each Disbursement this Period 2546.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Goldstein, Alexander J</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2011
Mailing Address 16 Addington Rd #41		<b>Transaction ID : D368806</b>
City Brookline	State MA	
Purpose of Disbursement Salary expense	Candidate Name	Amount of Each Disbursement this Period 2546.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Goldstein, Alexander J</b>		Date of Disbursement MM / DD / YYYY 12 / 19 / 2011
Mailing Address 16 Addington Rd #41		<b>Transaction ID : D368807</b>
City Brookline	State MA	
Purpose of Disbursement reimbursement - cab fares	Candidate Name	Amount of Each Disbursement this Period 34.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	5127.76
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Goldstein, Alexander J</b>		Date of Disbursement MM / DD / YYYY 12 / 23 / 2011
Mailing Address 16 Addington Rd #41		<b>Transaction ID : D368808</b>
City Brookline	State MA	
Purpose of Disbursement salary expense	Candidate Name	Amount of Each Disbursement this Period 2546.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Goldstein, Alexander J</b>		Date of Disbursement MM / DD / YYYY 12 / 09 / 2011
Mailing Address 16 Addington Rd #41		<b>Transaction ID : D368809</b>
City Brookline	State MA	
Purpose of Disbursement Salary expense	Candidate Name	Amount of Each Disbursement this Period 2546.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Greco Productions</b>		Date of Disbursement MM / DD / YYYY 11 / 14 / 2011
Mailing Address 1701 Clinton St. #201		<b>Transaction ID : D368810</b>
City Los Angeles	State CA	
Purpose of Disbursement Site Update Fee	Candidate Name	Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	5393.50
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Hawthorne Hotel**

Mailing Address On the Common

City Salem State MA Zip Code 01970

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2011

**Transaction ID : D368811**

Amount of Each Disbursement this Period

2407.22

Full Name (Last, First, Middle Initial)

**B. Hoffer, Dan**

Mailing Address 2 Buckley Ave #1

City Boston State MA Zip Code 02113

Purpose of Disbursement  
Graphic design

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2011

**Transaction ID : D368680**

Amount of Each Disbursement this Period

82.50

Full Name (Last, First, Middle Initial)

**C. Hoffer, Dan**

Mailing Address 2 Buckley Ave #1

City Boston State MA Zip Code 02113

Purpose of Disbursement  
Graphic design services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2011

**Transaction ID : D368681**

Amount of Each Disbursement this Period

165.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2654.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Hoffer, Dan**

Mailing Address 2 Buckley Ave #1

City Boston State MA Zip Code 02113

Purpose of Disbursement  
Graphic design expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368682**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jerry L Johnson**

Mailing Address 1075 Green Valley Rd

City Bryn Mawr State PA Zip Code 19010-1911

Purpose of Disbursement  
In-kind: Catering Expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D358664**

Amount of Each Disbursement this Period

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. L'Espalier**

Mailing Address 774 Boylston St

City Boston State MA Zip Code 02199

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368822**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368683**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368684**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368685**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : D368686**

Amount of Each Disbursement this Period

1146.09

Full Name (Last, First, Middle Initial)

**B. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : D368687**

Amount of Each Disbursement this Period

1146.08

Full Name (Last, First, Middle Initial)

**C. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2011

**Transaction ID : D368688**

Amount of Each Disbursement this Period

1858.09

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4150.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Lyon Aviation Inc.**

Mailing Address 832 Tamarack Rd

City Pittsfield State MA Zip Code 01201

Purpose of Disbursement  
Air charter

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2011

**Transaction ID : D368823**

Amount of Each Disbursement this Period

3255.05

Full Name (Last, First, Middle Initial)

**B. MailChump**

Mailing Address 512 Means St, Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Internet expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2011

**Transaction ID : D368690**

Amount of Each Disbursement this Period

240.00

Full Name (Last, First, Middle Initial)

**C. MailChump**

Mailing Address 512 Means St, Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Internet expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2011

**Transaction ID : D368691**

Amount of Each Disbursement this Period

240.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3735.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. MailChump**

Mailing Address 512 Means St, Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Internet expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368692**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MailChump**

Mailing Address 512 Means St, Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Internet expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368693**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MailChump**

Mailing Address 512 Means St, Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Internet mail service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368694**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. MailChump**

Mailing Address 512 Means St, Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Internet expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D368695

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Massachusetts Democratic Party-Federal**

Mailing Address 77 Summer St, 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Rent per sublease

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D368696

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Massachusetts Democratic Party-Federal**

Mailing Address 77 Summer St, 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Rent per sublease

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D368697

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Massachusetts Democratic Party-Federal**

Mailing Address 77 Summer St, 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Rent per sublease

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 20 / 2011

**Transaction ID : D368698**

Amount of Each Disbursement this Period

2700.00

Full Name (Last, First, Middle Initial)

**B. Massachusetts Democratic Party-Federal**

Mailing Address 77 Summer St, 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Rent per sublease

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
08 / 25 / 2011

**Transaction ID : D368699**

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

**C. Massachusetts Democratic Party-Federal**

Mailing Address 77 Summer St, 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Rent per sublease

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 22 / 2011

**Transaction ID : D368700**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8700.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Max Ultimate Food**

Mailing Address 101 Hampden Street

City Roxbury State MA Zip Code 02119

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2011

**Transaction ID : D368828**

Amount of Each Disbursement this Period

2162.82

Full Name (Last, First, Middle Initial)

**B. Michael N. Moore**

Mailing Address PO Box 1376

City Boston State MA Zip Code 02130

Purpose of Disbursement  
Database use

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 29 / 2011

**Transaction ID : D368830**

Amount of Each Disbursement this Period

950.00

Full Name (Last, First, Middle Initial)

**C. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City Concord State MA Zip Code 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2011

**Transaction ID : D368701**

Amount of Each Disbursement this Period

1845.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4957.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. O'Brien, David</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2011
Mailing Address 510 Barretts Mill Rd		<b>Transaction ID : D368702</b>
City Concord	State MA	
Purpose of Disbursement Salary expense	Candidate Name	Amount of Each Disbursement this Period 1845.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. O'Brien, David</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2011
Mailing Address 510 Barretts Mill Rd		<b>Transaction ID : D368703</b>
City Concord	State MA	
Purpose of Disbursement Salary expense	Candidate Name	Amount of Each Disbursement this Period 12368.96
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>C. O'Brien, David</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2011
Mailing Address 510 Barretts Mill Rd		<b>Transaction ID : D368704</b>
City Concord	State MA	
Purpose of Disbursement Salary expense	Candidate Name	Amount of Each Disbursement this Period 1174.71
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	15388.67
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City State Zip Code  
Concord MA 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2011

**Transaction ID : D368705**

Amount of Each Disbursement this Period

1174.69
---------

Full Name (Last, First, Middle Initial)

**B. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City State Zip Code  
Concord MA 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2011

**Transaction ID : D368706**

Amount of Each Disbursement this Period

1845.00
---------

Full Name (Last, First, Middle Initial)

**C. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City State Zip Code  
Concord MA 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2011

**Transaction ID : D368707**

Amount of Each Disbursement this Period

1845.01
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4864.70
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City State Zip Code  
Concord MA 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2011

**Transaction ID : D368708**

Amount of Each Disbursement this Period

1845.01

Full Name (Last, First, Middle Initial)

**B. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City State Zip Code  
Concord MA 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2011

**Transaction ID : D368709**

Amount of Each Disbursement this Period

1845.00

Full Name (Last, First, Middle Initial)

**C. O'Brien, David**

Mailing Address 510 Barretts Mill Rd

City State Zip Code  
Concord MA 01742

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2011

**Transaction ID : D368710**

Amount of Each Disbursement this Period

1845.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5535.01

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address Suite 4800 1201 Third Avenue

City State Zip Code  
Seattle WA 98101-3099

Purpose of Disbursement  
Legal Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2011

**Transaction ID : D368711**

Amount of Each Disbursement this Period

235.00
--------

Full Name (Last, First, Middle Initial)

**B. Perkins Coie**

Mailing Address Suite 4800 1201 Third Avenue

City State Zip Code  
Seattle WA 98101-3099

Purpose of Disbursement  
Legal Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2011

**Transaction ID : D368712**

Amount of Each Disbursement this Period

131.32
--------

Full Name (Last, First, Middle Initial)

**C. Perkins Coie**

Mailing Address Suite 4800 1201 Third Avenue

City State Zip Code  
Seattle WA 98101-3099

Purpose of Disbursement  
Legal Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2011

**Transaction ID : D368713**

Amount of Each Disbursement this Period

157.35
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

523.67
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address Suite 4800 1201 Third Avenue

City State Zip Code  
Seattle WA 98101-3099

Purpose of Disbursement  
Legal Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368714**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Sawyer Design Associates, Inc.**

Mailing Address 440B E Squantum St

City State Zip Code  
North Quincy MA 02171

Purpose of Disbursement  
Printing expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368846**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Silvertone Bar & Grill**

Mailing Address 69 Bromfield Street

City State Zip Code  
Boston MA 02108

Purpose of Disbursement  
Press reception

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368847**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Stella Restaurant**

Mailing Address 1525 Washington St

City Boston State MA Zip Code 02118

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2011

**Transaction ID : D368854**

Amount of Each Disbursement this Period

1560.36

Full Name (Last, First, Middle Initial)

**B. The Catered Affair**

Mailing Address P.O. Box 432

City Hingham State MA Zip Code 02043

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2011

**Transaction ID : D368856**

Amount of Each Disbursement this Period

8549.57

Full Name (Last, First, Middle Initial)

**C. The Catered Affair**

Mailing Address P.O. Box 432

City Hingham State MA Zip Code 02043

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2011

**Transaction ID : D368857**

Amount of Each Disbursement this Period

4828.19

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

14938.12



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Boc 15062

City Albany State NY Zip Code 12212-5062

Purpose of Disbursement  
Cell Phone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 17 / 2011

**Transaction ID : D368907**

Amount of Each Disbursement this Period

126.97

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address P.O. Boc 15062

City Albany State NY Zip Code 12212-5062

Purpose of Disbursement  
Cellphone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2011

**Transaction ID : D368908**

Amount of Each Disbursement this Period

200.27

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address P.O. Boc 15062

City Albany State NY Zip Code 12212-5062

Purpose of Disbursement  
Cellphone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2011

**Transaction ID : D368909**

Amount of Each Disbursement this Period

215.43

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

542.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 19 / 2011

**Transaction ID : D368905**

Amount of Each Disbursement this Period

366.22

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2011

**Transaction ID : D368906**

Amount of Each Disbursement this Period

112.31

Full Name (Last, First, Middle Initial)

**C. W.B. Mason, Inc.**

Mailing Address PO Box 982201

City Boston State MA Zip Code 02298-1101

Purpose of Disbursement office supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2011

**Transaction ID : D368914**

Amount of Each Disbursement this Period

361.09

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

839.62

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. W.B. Mason, Inc.**

Mailing Address PO Box 982201

City Boston State MA Zip Code 02298-1101

Purpose of Disbursement  
office supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : D368915**

Amount of Each Disbursement this Period

56.30

Full Name (Last, First, Middle Initial)

**B. W.B. Mason, Inc.**

Mailing Address PO Box 982201

City Boston State MA Zip Code 02298-1101

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : D368916**

Amount of Each Disbursement this Period

34.59

Full Name (Last, First, Middle Initial)

**C. Yellow, Inc.**

Mailing Address 1038 Washington St

City Holliston State MA Zip Code 01746

Purpose of Disbursement  
Printing expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 02 / 2011

**Transaction ID : D368923**

Amount of Each Disbursement this Period

2261.16

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2352.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	01	/	2011

Transaction ID : **D383202**

Amount of Each Disbursement this Period

214.70
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Brontas, Paul**

Mailing Address 39 Sheffield Rd

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Postage reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	24	/	2011

Transaction ID : **D368656**

Amount of Each Disbursement this Period

45.75
-------

Full Name (Last, First, Middle Initial)

**C. Liu, Jennifer**

Mailing Address 14 Irving St #2

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Rental car reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	08	/	2011

Transaction ID : **D368689**

Amount of Each Disbursement this Period

205.46
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

251.21
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Enterprise Rent-a-car**

Mailing Address Philadelphia Airport

City Philadelphia State PA Zip Code 19114

Purpose of Disbursement  
Auto rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2011

**Transaction ID : D369883**

Amount of Each Disbursement this Period

205.46

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2011

**Transaction ID : D368744**

Amount of Each Disbursement this Period

1371.48

Full Name (Last, First, Middle Initial)

**C. DELTA AIR LINES ATLANTA**

Mailing Address P.O. Box 20980 Department 980

City Atlanta State GA Zip Code 30320-2980

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2011

**Transaction ID : D368793**

Amount of Each Disbursement this Period

378.70

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1371.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ORBITZ MANKATO**

Mailing Address 500 W Madison St, Suite 1000

City Chicago State IL Zip Code 60661

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2011

Transaction ID : D368835

Amount of Each Disbursement this Period

249.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TOWNE STOVE & SPIRITBOSTON**

Mailing Address 900 Boylston St

City Boston State MA Zip Code 02115-3101

Purpose of Disbursement  
Meetings expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2011

Transaction ID : D368859

Amount of Each Disbursement this Period

389.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2011

Transaction ID : D368861

Amount of Each Disbursement this Period

223.70

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2011

**Transaction ID : D368862**

Amount of Each Disbursement this Period

1313.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2011

**Transaction ID : D368863**

Amount of Each Disbursement this Period

1313.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2011

**Transaction ID : D368865**

Amount of Each Disbursement this Period

494.40

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2011

**Transaction ID : D368866**

Amount of Each Disbursement this Period

494.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2011

**Transaction ID : D368890**

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2011

**Transaction ID : D368891**

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 27 / 2011

Transaction ID : D368892

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 27 / 2011

Transaction ID : D368893

Amount of Each Disbursement this Period

789.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 27 / 2011

Transaction ID : D368894

Amount of Each Disbursement this Period

297.90

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2011

Transaction ID : D368895

Amount of Each Disbursement this Period

789.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. WESTIN CHARLOTTE WESCHARLOTTE**

Mailing Address 601 South College Street

City Charlotte State NC Zip Code 28202

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2011

Transaction ID : D368920

Amount of Each Disbursement this Period

265.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WESTIN CHARLOTTE WESCHARLOTTE**

Mailing Address 601 South College Street

City Charlotte State NC Zip Code 28202

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2011

Transaction ID : D368921

Amount of Each Disbursement this Period

320.51

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 17 / 2011

**Transaction ID : D368745**

Amount of Each Disbursement this Period

10343.24

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Cardholder fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2011

**Transaction ID : D368746**

Amount of Each Disbursement this Period

595.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 60 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Train fare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2011

**Transaction ID : D368755**

Amount of Each Disbursement this Period

235.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10343.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. FOUR SEASONS HOTELS BOSTON**

Mailing Address 200 Boylston St

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Meeting Expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2011			

**Transaction ID : D368798**

Amount of Each Disbursement this Period

54.94
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. IHG WASHA401 WASHINGTON**

Mailing Address 1401 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Meals expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2011			

**Transaction ID : D368818**

Amount of Each Disbursement this Period

41.60
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JETBLUE AIRWAYS 9010JETBLUE**

Mailing Address 118-29 Queens Blvd

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2011			

**Transaction ID : D368819**

Amount of Each Disbursement this Period

223.70
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Media 3 Web Hosting**

Mailing Address 33 Riverside Drive

City Pembroke State MA Zip Code 02359

Purpose of Disbursement  
Web Hosting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2011			

Transaction ID : D368829

Amount of Each Disbursement this Period

271.50
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Renaissance Mayflower**

Mailing Address 1127 Connecticut Avenue NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2011			

Transaction ID : D368843

Amount of Each Disbursement this Period

470.59
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Renaissance Mayflower**

Mailing Address 1127 Connecticut Avenue NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2011			

Transaction ID : D368844

Amount of Each Disbursement this Period

1186.55
---------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Trade**

Mailing Address 540 Atlantic Avenue

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Meeting expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368860**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368867**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D368868**

Amount of Each Disbursement this Period

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2011

**Transaction ID : D368870**

Amount of Each Disbursement this Period

113.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2011

**Transaction ID : D368871**

Amount of Each Disbursement this Period

56.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2011

**Transaction ID : D368872**

Amount of Each Disbursement this Period

111.70

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2011

Transaction ID : D368873

Amount of Each Disbursement this Period

96.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2011

Transaction ID : D368874

Amount of Each Disbursement this Period

96.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2011

Transaction ID : D368875

Amount of Each Disbursement this Period

419.70

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2011			

**Transaction ID : D368876**

Amount of Each Disbursement this Period

419.70
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2011			

**Transaction ID : D368877**

Amount of Each Disbursement this Period

421.70
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2011			

**Transaction ID : D368878**

Amount of Each Disbursement this Period

421.70
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. W Hotel**

Mailing Address 1567 Broadway

City New York State NY Zip Code 10036

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2011

**Transaction ID : D368911**

Amount of Each Disbursement this Period

611.27

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. W Hotel**

Mailing Address 1567 Broadway

City New York State NY Zip Code 10036

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2011

**Transaction ID : D368912**

Amount of Each Disbursement this Period

530.21

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. W Hotel**

Mailing Address 1567 Broadway

City New York State NY Zip Code 10036

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2011

**Transaction ID : D368913**

Amount of Each Disbursement this Period

530.21

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. Washington Court HotWashington**

Mailing Address 525 New Jersey Avenue, NW

City Washington D.C. State DC Zip Code 20001

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2011

Transaction ID : D368917

Amount of Each Disbursement this Period

544.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2011

Transaction ID : D368747

Amount of Each Disbursement this Period

5068.35

Full Name (Last, First, Middle Initial)

**C. Moondance Restaurant**

Mailing Address 300 Peachtree Indus. Blvd

City Suwanee State GA Zip Code 30024

Purpose of Disbursement  
Food for meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 25 / 2011

Transaction ID : D368832

Amount of Each Disbursement this Period

228.94

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5068.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 30 / 2011

Transaction ID : D368879

Amount of Each Disbursement this Period: 54.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 30 / 2011

Transaction ID : D368880

Amount of Each Disbursement this Period: 54.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement food for meeting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : D368748

Amount of Each Disbursement this Period: 40.78

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 40.78

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2011

**Transaction ID : D368749**

Amount of Each Disbursement this Period

2670.06

Full Name (Last, First, Middle Initial)

**B. Central Parking**

Mailing Address 125 Lincoln St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
parking

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2011

**Transaction ID : D368768**

Amount of Each Disbursement this Period

300.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Palomar DC**

Mailing Address 2121 P St NW

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : D368836**

Amount of Each Disbursement this Period

319.46

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2670.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 13 / 2011

Transaction ID : D368881

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2011

Transaction ID : D368882

Amount of Each Disbursement this Period

111.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2011

Transaction ID : D368883

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2011

**Transaction ID : D368884**

Amount of Each Disbursement this Period

169.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2011

**Transaction ID : D368752**

Amount of Each Disbursement this Period

4740.99

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Membership fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 18 / 2011

**Transaction ID : D368750**

Amount of Each Disbursement this Period

38.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4740.99

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 18 / 2011

Transaction ID : D368751

Amount of Each Disbursement this Period

0.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CAPE AIR 3061000 CZRRZ**

Mailing Address 1475 Airport Road

City New Bedford State MA Zip Code 02746-1368

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2011

Transaction ID : D368764

Amount of Each Disbursement this Period

194.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CAPE AIR 3061000 CZRRZ**

Mailing Address 1475 Airport Road

City New Bedford State MA Zip Code 02746-1368

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2011

Transaction ID : D368765

Amount of Each Disbursement this Period

194.50

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. CAPE AIR 3061000 CZRRZ**

Mailing Address 1475 Airport Road

City State Zip Code  
New Bedford MA 02746-1368

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2011

**Transaction ID : D368766**

Amount of Each Disbursement this Period

194.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CHEAPTICKETS NASHVILLE**

Mailing Address 500 West Madison Street, Suite 100

City State Zip Code  
Chicago IL 60661

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2011

**Transaction ID : D368770**

Amount of Each Disbursement this Period

554.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CHEAPTICKETS NASHVILLE**

Mailing Address 500 West Madison Street, Suite 100

City State Zip Code  
Chicago IL 60661

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2011

**Transaction ID : D368771**

Amount of Each Disbursement this Period

554.40

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. CHEAPTICKETS NASHVILLE**

Mailing Address 500 West Madison Street, Suite 100

City Chicago State IL Zip Code 60661

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2011

Transaction ID : D368772

Amount of Each Disbursement this Period

554.40
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HYLINE CRUISES - RESHYANNIS**

Mailing Address 220 Ocean Street

City Hyannis State MA Zip Code 02601

Purpose of Disbursement  
Ferry transport

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2011

Transaction ID : D368812

Amount of Each Disbursement this Period

144.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HYLINE CRUISES - RESHYANNIS**

Mailing Address 220 Ocean Street

City Hyannis State MA Zip Code 02601

Purpose of Disbursement  
Ferry travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		16		2011

Transaction ID : D368813

Amount of Each Disbursement this Period

144.00
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. HYLINE CRUISES - RESHYANNIS**

Mailing Address 220 Ocean Street

City Hyannis State MA Zip Code 02601

Purpose of Disbursement  
Ferry travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2011

Transaction ID : D368814

Amount of Each Disbursement this Period

36.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2011

Transaction ID : D368885

Amount of Each Disbursement this Period

769.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2011

Transaction ID : D368886

Amount of Each Disbursement this Period

769.40

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2011

**Transaction ID : D368753**

Amount of Each Disbursement this Period

9914.02

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 60 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Train fare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

**Transaction ID : D383200**

Amount of Each Disbursement this Period

238.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Cranwell Resort Spa**

Mailing Address 55 Lee Road

City Lee State MA Zip Code 01240

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : D368790**

Amount of Each Disbursement this Period

407.57

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9914.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. DC COAST 0061 WASHINGTON**

Mailing Address 1401 K St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2011

**Transaction ID : D383219**

Amount of Each Disbursement this Period

750.00
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. DC COAST 0061 WASHINGTON**

Mailing Address 1401 K St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Catering expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2011

**Transaction ID : D383220**

Amount of Each Disbursement this Period

1330.00
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. FOUR SEASONS HOTELS BOSTON**

Mailing Address 200 Boylston St

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Meetings expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2011

**Transaction ID : D383214**

Amount of Each Disbursement this Period

46.99
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**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. HYLINE CRUISES - RESHYANNIS**

Mailing Address 220 Ocean Street

City Hyannis State MA Zip Code 02601

Purpose of Disbursement  
Ferry travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2011

Transaction ID : D368815

Amount of Each Disbursement this Period

213.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HYLINE CRUISES - RESHYANNIS**

Mailing Address 220 Ocean Street

City Hyannis State MA Zip Code 02601

Purpose of Disbursement  
Ferry travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2011

Transaction ID : D368816

Amount of Each Disbursement this Period

36.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HYLINE CRUISES - RESHYANNIS**

Mailing Address 220 Ocean Street

City Hyannis State MA Zip Code 02601

Purpose of Disbursement  
Parking expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2011

Transaction ID : D368817

Amount of Each Disbursement this Period

36.00
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. IHG WASHA401 WASHINGTON**

Mailing Address 1401 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2011

**Transaction ID : D383227**

Amount of Each Disbursement this Period

613.64
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. LOEWS HOTELS THE REGENCY**

Mailing Address 540 Park Avenue

City New York State NY Zip Code 10065

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2011

**Transaction ID : D383211**

Amount of Each Disbursement this Period

779.15
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. LOEWS HOTELS THE REGENCY**

Mailing Address 540 Park Avenue

City New York State NY Zip Code 10065

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2011

**Transaction ID : D383212**

Amount of Each Disbursement this Period

702.33
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**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. LOEWS HOTELS THE REGENCY**

Mailing Address 540 Park Avenue

City New York State NY Zip Code 10065

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383207

Amount of Each Disbursement this Period

656.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Ritz Carlton Philadelphia**

Mailing Address 10 Avenue of the Arts

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383198

Amount of Each Disbursement this Period

436.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Ritz Carlton Philadelphia**

Mailing Address 10 Avenue of the Arts

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383215

Amount of Each Disbursement this Period

484.61

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial) <b>A. Ritz Carlton Philadelphia</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2011
Mailing Address 10 Avenue of the Arts		<b>Transaction ID : D383216</b>
City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period 446.56	
Purpose of Disbursement Lodging expense	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ritz Carlton Philadelphia</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2011
Mailing Address 10 Avenue of the Arts		<b>Transaction ID : D383217</b>
City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period 441.61	
Purpose of Disbursement Lodging expense	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ritz Carlton Philadelphia</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2011
Mailing Address 10 Avenue of the Arts		<b>Transaction ID : D383218</b>
City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period 7.56	
Purpose of Disbursement Lodging expense	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ST REGIS ASPEN ST REASPEN**

Mailing Address 315 East Dean Street

City Aspen State CO Zip Code 81611

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 29 / 2011

Transaction ID : D368849

Amount of Each Disbursement this Period

1150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ST REGIS ASPEN ST REASPEN**

Mailing Address 315 East Dean Street

City Aspen State CO Zip Code 81611

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2011

Transaction ID : D368850

Amount of Each Disbursement this Period

44.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ST REGIS ASPEN ST REASPEN**

Mailing Address 315 East Dean Street

City Aspen State CO Zip Code 81611

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2011

Transaction ID : D368851

Amount of Each Disbursement this Period

371.74

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. ST REGIS ASPEN ST REASPEN**

Mailing Address 315 East Dean Street

City Aspen State CO Zip Code 81611

Purpose of Disbursement  
lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2011

Transaction ID : D368852

Amount of Each Disbursement this Period

415.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

Transaction ID : D368887

Amount of Each Disbursement this Period

427.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

Transaction ID : D368888

Amount of Each Disbursement this Period

427.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

Transaction ID : D368889

Amount of Each Disbursement this Period

427.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383201

Amount of Each Disbursement this Period

214.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383199

Amount of Each Disbursement this Period

339.40

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

### A. U.S. Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383208

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. U.S. Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383209

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. U.S. Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

Transaction ID : D383210

Amount of Each Disbursement this Period

771.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

**Transaction ID : D383203**

Amount of Each Disbursement this Period

214.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

**Transaction ID : D383204**

Amount of Each Disbursement this Period

282.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2011

**Transaction ID : D383205**

Amount of Each Disbursement this Period

282.40

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2011

Transaction ID : D383206

Amount of Each Disbursement this Period

282.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 77 W. Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2011

Transaction ID : D368896

Amount of Each Disbursement this Period

222.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 77 W. Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement  
Inflight meal

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2011

Transaction ID : D368897

Amount of Each Disbursement this Period

12.98

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 77 W. Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement  
Airfare expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : D368898**

Amount of Each Disbursement this Period

222.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2011

**Transaction ID : D368754**

Amount of Each Disbursement this Period

4222.78

Full Name (Last, First, Middle Initial)

**C. FARIMONT COPLEY PLAZBOSTON**

Mailing Address 138 Saint James Avenue

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Meetings expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2011

**Transaction ID : D368797**

Amount of Each Disbursement this Period

270.63

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4222.78



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. FOUR SEASONS HOTELS BOSTON**

Mailing Address 200 Boylston St

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Meetings expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2011

Transaction ID : D368799

Amount of Each Disbursement this Period

194.38

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ST REGIS ASPEN ST REASPEN**

Mailing Address 315 East Dean Street

City Aspen State CO Zip Code 81611

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 27 / 2011

Transaction ID : D368853

Amount of Each Disbursement this Period

1005.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Goldstein, Alexander J**

Mailing Address 16 Addington Rd #41

City Brookline State MA Zip Code 02445

Purpose of Disbursement  
Travel reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2011

Transaction ID : D368804

Amount of Each Disbursement this Period

204.96

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

204.96

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. The Hotel George**

Mailing Address 15 E Street

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2011

**Transaction ID : D369882**

Amount of Each Disbursement this Period

204.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Ryan, Brendan C.**

Mailing Address 14 Foster St #1

City Boston State MA Zip Code 02109

Purpose of Disbursement  
Travel reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2011

**Transaction ID : D368845**

Amount of Each Disbursement this Period

636.85

Full Name (Last, First, Middle Initial)

**C. Sofitel LA**

Mailing Address 8555 Beverly Blvd

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2011

**Transaction ID : D368848**

Amount of Each Disbursement this Period

241.34

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

636.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Baggage fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2011

Transaction ID : D368869

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Baggage fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2011

Transaction ID : D368864

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WESTIN CHARLOTTE WESCHARLOTTE**

Mailing Address 601 South College Street

City Charlotte State NC Zip Code 28202

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2011

Transaction ID : D368919

Amount of Each Disbursement this Period

320.51

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

268947.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Together PAC Inc**

Full Name (Last, First, Middle Initial)

**A. John F Fish**

Mailing Address 776 Boylston St

City Boston State MA Zip Code 02199-7841

Purpose of Disbursement  
Contribution refund

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 22 / 2011

**Transaction ID : D368820**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Martin W Fisher Jr**

Mailing Address 51 Franklin St

City Boston State MA Zip Code 02110-1335

Purpose of Disbursement  
Contribution refund expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : D368826**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. John A Stefanini**

Mailing Address PO Box 2311

City Framingham State MA Zip Code 01703-2311

Purpose of Disbursement  
Contribution refund expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : D368821**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11000.00

11000.00