

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER 2004 FEB -1 12:03 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12 PEAKS

CONNECTICUT BANKERS ASSOCIATION

POSITION: COMMITTEE

ADDRESS (number and street) 110 WATER SIDE DRIVE

Check if different than previously reported. (ACC) FARMINGTON CT 06032

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00108605 3. IS THIS REPORT NEW OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07/01/2003 through 12/31/2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gerald M. Noonan

Signature of Treasurer [Handwritten Signature] Date 01/26/2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2006)

Write or Type Committee Name

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period From: 07 01 20 03 To: 12 31 20 03

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1. 2 0 0 3		9 5 6 0 1 9
(b) Cash on Hand at Beginning of Reporting Period	11 5 5 8 4 5	
(c) Total Receipts (from Line 19)	7 1 0 5 0 0	9 2 4 0 0 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1 8 6 6 3 4 5	1 8 8 0 0 1 9
7. Total Disbursements (from Line 31)	2 1 7 5 0 0	2 3 1 1 7 5
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1 6 4 8 8 4 4	1 6 4 8 8 4 4
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 0	

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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 07 01 2003 To: 12 31 2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0 0	
(b) Non-Fed (use Schedule A)	6 2 7 5 0 0	
(ii) Unitemized	0 0	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	6 2 7 5 0 0	7 2 6 0 0 0
(b) Political Party Committees	0 0	0 0
(c) Other Political Committees (such as PACs)	8 3 0 0 0 0	1 9 8 0 0 0
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 38, page 5)	7 1 0 5 0 0	9 2 4 0 0 0
12. Transfers From Affiliated/Other Party Committees	0 0	0 0
13. All Loans Received	0 0	0 0
14. Loan Repayments Received	0 0	0 0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0 0	0 0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0 0	0 0
17. Other Federal Receipts (Dividends, Interest, etc.)	0 0	0 0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H5)	0 0	0 0
(b) Levin Funds (from Schedule H5)	0 0	0 0
(c) Total Transfers (add 18(a) and 18(b))	0 0	0 0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7 1 0 5 0 0	9 2 4 0 0 0
20. Total Federal Receipts (subtract Line 16(c) from Line 19)	7 1 0 5 0 0	9 2 4 0 0 0

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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 0	0 0
(ii) Non-Federal Share	0 0	0 0
(b) Other Federal Operating Expenditures	1 7 5, 0 1	3 1 1, 7 5
(c) Total Operating Expenditures (add 21(a)(i), 21(ii), and 21(b))	1 7 5, 0 1	3 1 1, 7 5
22. Transfers to Affiliated/Other Party Committees	0 0	0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	2 0 0 0, 0 0	2 0 0 0, 0 0
24. Independent Expenditures (use Schedule E)	0 0	0 0
25. Coordinated Party Expenditures (2 U.S.C. §14102) (use Schedule F)	0 0	0 0
26. Loan Repayments Made	0 0	0 0
27. Loans Made	0 0	0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 0	0 0
(b) Political Party Committees	0 0	0 0
(c) Other Political Committees (such as PACs)	0 0	0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 0	0 0
29. Other Disbursements	0 0	0 0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H5)		
(i) Federal Share	0 0	0 0
(ii) "Levin" Share	0 0	0 0
(b) Federal Election Activity Paid Entirely With Federal Funds	0 0	0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0 0	0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2 1 7 5, 0 1	2 3 1 1, 7 5
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2 1 7 5, 0 1	2 3 1 1, 7 5

DETAILED SUMMARY PAGE
of Disbursements

Page 5

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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)	7,105.00	9,240.00
34. Total Contribution Refunds (from Line 20(d))00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7,105.00	9,240.00
36. Total Federal Operating Expenditures (add Line 21(e)(i) and Line 21(b))	2,175.01	2,311.75
37. Offsets to Operating Expenditures (from Line 15, page 3)00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2,175.01	2,311.75

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

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

FOR LINE NUMBER		PAGE 1	OF 1
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<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)

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. HOLLAND BANK PAC		Date of Receipt 12 29 2003
Mailing Address 348 HOLLAND TURNPIKE		Amount of Each Receipt This Period 830.00
City VERNON	State CT	
FEC ID number of contributing federal political committee C00194597		
Name of Employer	Occupation	
Receipt For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 830.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Amount of Each Receipt This Period
City	State	
FEC ID number of contributing federal political committee C		
Name of Employer	Occupation	
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt This Period
City	State	
FEC ID number of contributing federal political committee C		
Name of Employer	Occupation	
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date	

SUBTOTAL of Receipts This Page (optional)	830.00
TOTAL This Period (last page this line number only)	830.00

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

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

FORM LINE NUMBER:
(check only one)

<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" 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"/> 30a

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NAME OF COMMITTEE (In Full)

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOE LIEBERMAN FOR PRESIDENT, INC.

Date of Disbursement

0 9 / 1 2 / 2 0 0 3

Mailing Address

111 FOUNDERS PLAZA SUITE 1000

City State Zip Code

EAST HARTFORD CT 06108

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

Candidate Name

JOE LIEBERMAN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District

0 1 1
Category/
Type

Amount of Each Disbursement this Period

2,000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District

SUBTOTAL of Disbursements this Page (optional)

2,000.00

TOTAL This Period (last page this line repeats only)

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 1-27-04
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<div style="display: flex; justify-content: space-between;"> WMD PREPARER 2-1-04 DATE PREPARED </div>	