

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

60P 5 Committee

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="2007"/>		<input type="text" value="328.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="328.50"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="2851.85"/>	<input type="text" value="2851.85"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3180.25"/>	<input type="text" value="3180.35"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1623.94"/>	<input type="text" value="1623.94"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1556.41"/>	<input type="text" value="1556.41"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="1500.00"/>	

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

28039691079

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

60P5 Committee

Report Covering the Period: From:

01 / *01* / *2007*

To:

06 / *30* / *2007*

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
 - (i) Itemized (use Schedule A).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

- 0 -
2,452.00
~~*399.85*~~
399.85

- 0 -
2,452.00
~~*399.85*~~
399.85

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

2,851.85

2,851.85

12. Transfers From Affiliated/Other Party Committees.....

.....

.....

13. All Loans Received.....

.....

1,500.00

14. Loan Repayments Received.....

.....

.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

.....

.....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

.....

.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

.....

.....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

.....
.....
.....

.....
.....
.....

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

2,851.85

4,351.85

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

2,851.85

4,351.85

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DETAILED SUMMARY PAGE
of Disbursements

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Page 4

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	1,623.94	1,623.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,623.94	1,623.94
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,623.94	1,623.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,623.94	1,623.94

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DETAILED SUMMARY PAGE
of Disbursements

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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)	2,851.85	2,851.85
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2,851.85	2,851.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1,623.94	1,623.94
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1,623.94	1,623.94

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**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	OF
<input 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)
60P 5 Committee

A. Full Name (Last, First, Middle Initial)
60P 5 State

Mailing Address
124 Coal Pit Hill Rd #39

City **Danbury** State **CT** Zip Code **06810**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **unaffiliated fundraiser**

Aggregate Year-to-Date **79.85**

Date of Receipt
M M / D D / Y Y Y Y
04 05 2007

Amount of Each Receipt this Period
79.85
State PAC (CT)

B. Full Name (Last, First, Middle Initial)
Middlebury Republican Town Committee

Mailing Address
PO Box 1206

City **Middlebury** State **CT** Zip Code **06762**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **unaffiliated fundraiser**

Aggregate Year-to-Date **320.00**

Date of Receipt
M M / D D / Y Y Y Y
05 22 2007

Amount of Each Receipt this Period
320.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶ **399.85**

TOTAL This Period (last page this line number only).....▶ **399.85**

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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)						PAGE	OF 2
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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)
GPS Committee

A. Full Name (Last, First, Middle Initial) Courtyard Marriott, Waterbury Downtown		Date of Disbursement 04' 26' 2007
Mailing Address 63 Grand St		Amount of Each Disbursement this Period 500.00
City Waterbury	State CT	
Zip Code 06702	Purpose of Disbursement Brunch deposit	
Candidate Name	Category/Type 003	
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 checked="" type="checkbox"/> Other (specify) unaffiliated fundraising	
State: District:		

B. Full Name (Last, First, Middle Initial) Nolan, Vincent P.		Date of Disbursement 05' 23' 2007
Mailing Address 12 Hillandale Drive		Amount of Each Disbursement this Period 277.02
City Danbury	State CT	
Zip Code 06810	Purpose of Disbursement postage, printing (reimbursement)	
Candidate Name	Category/Type 003	
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 checked="" type="checkbox"/> Other (specify) unaffiliated fundraising	
State: District:		

C. Full Name (Last, First, Middle Initial) Courtyard Marriott, Waterbury Downtown		Date of Disbursement 06' 05' 2007
Mailing Address 63 Grand St		Amount of Each Disbursement this Period 729.08
City Waterbury	State CT	
Zip Code 06702	Purpose of Disbursement Brunch Catering	
Candidate Name	Category/Type 003	
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 checked="" type="checkbox"/> Other (specify) unaffiliated fundraiser	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1,506.10
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)

PAGE 2 OF 2

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
GOP 5 Committee

Full Name (Last, First, Middle Initial) A. <i>Nolan, Vincent P</i>		Date of Disbursement MM/DD/YYYY <i>06-04-2007</i>
Mailing Address <i>12 Hillandale Rd</i>		Amount of Each Disbursement this Period <i>16.08</i>
City <i>Danbury</i>	State <i>CT</i>	
Zip Code <i>06811</i>		
Purpose of Disbursement <i>program printing (reimbursement)</i>	Category/Type <i>003</i>	
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 checked="" type="checkbox"/> Other (specify) <i>unaffiliated</i>	

Full Name (Last, First, Middle Initial) B. <i>Nolan, Vincent P.</i>		Date of Disbursement MM/DD/YYYY <i>06-08-2007</i>
Mailing Address <i>12 Hillandale Rd</i>		Amount of Each Disbursement this Period <i>101.76</i>
City <i>Danbury</i>	State <i>CT</i>	
Zip Code <i>06811</i>		
Purpose of Disbursement <i>award plaques (reimbursement)</i>	Category/Type <i>003</i>	
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 checked="" type="checkbox"/> Other (specify) <i>unfiled fundraising</i>	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM/DD/YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement	Category/Type	
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) ▼	

SUBTOTAL of Disbursements This Page (optional)..... *117.84*

TOTAL This Period (last page this line number only)..... *1623.94*

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SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full)
GOP 5 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)
Various Individuals

Mailing Address
see below

City State ZIP Code

Election:
 Primary
 General
 Other (specify) ∇

Original Amount of Loan <u>1,500.00</u>	Cumulative Payment To Date <u>-0-</u>	Balance Outstanding at Close of This Period <u>1,500.00</u>
--	--	--

TERMS

Date Incurred 01/12/2006 Date Due 01/12/2009 Interest Rate 1 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <u>Nolan Vincent P</u>	Name of Employer <u>Town of New Milford CT</u>
Mailing Address <u>12 Hillendale Rd</u>	Occupation <u>Economic Development</u>
City State ZIP Code <u>Danbury CT 06810</u>	Amount Guaranteed Outstanding: <u>250.00</u>
2. Full Name (Last, First, Middle Initial) <u>Saracino, Mary G</u>	Name of Employer <u>Retired</u>
Mailing Address <u>5 Brinscall Ct</u>	Occupation <u>Retired</u>
City State ZIP Code <u>Danbury CT 06810</u>	Amount Guaranteed Outstanding: <u>250.00</u>
3. Full Name (Last, First, Middle Initial) <u>DeMaida, Allyn N.</u>	Name of Employer <u>State of CT</u>
Mailing Address <u>185 Pierpont Rd</u>	Occupation <u>Ex. Asst. Comm. DEP</u>
City State ZIP Code <u>Waterbury CT 06705</u>	Amount Guaranteed Outstanding: <u>250.00</u>
4. Full Name (Last, First, Middle Initial) <u>James J Smith</u>	Name of Employer
Mailing Address <u>2 Little Brook Lane</u>	Occupation
City State ZIP Code <u>Newtown CT 06470</u>	Amount Guaranteed Outstanding: <u>250.00</u>

SUBTOTALS This Period This Page (optional) \blacktriangleright 1,000.00

TOTALS This Period (last page in this line only) \blacktriangleright

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

28039691086

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE <u>2</u> OF <u>2</u>
	FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
GOP 5 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial) <u>Various Individuals</u>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>▼</u>
Mailing Address <u>see below</u>	
City State ZIP Code	
Original Amount of Loan <u>Continued</u>	Cumulative Payment To Date Balance Outstanding at Close of This Period

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	MM / DD / YYYY	MM / DD / YYYY	% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Michael <u>Festa, Michael</u>	Name of Employer <u>self</u>
Mailing Address <u>PO Box 150</u>	Occupation <u>real estate / land lord</u>
City State ZIP Code <u>Oakville CT 06779</u>	Amount Guaranteed Outstanding: <u>250.00</u>
2. Full Name (Last, First, Middle Initial) <u>Sullivan, Robert B</u>	Name of Employer <u>Realtor Re Max Unlimited</u>
Mailing Address <u>PO Box 627</u>	Occupation <u>Realtor</u>
City State ZIP Code <u>New Milford CT 06776</u>	Amount Guaranteed Outstanding: <u>250.00</u>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	<u>500.00</u>
TOTALS This Period (last page in this line only).....▶	<u>1,500.00</u>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

28039691088

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 4/15/08
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jmcw *4/16/08*
 PREPARER DATE PREPARED