

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 70

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

| | | |
|--|--|---|
| 1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc | | 2. IDENTIFICATION NUMBER C00431379 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO Box 270701 | | |
| CITY, STATE, and ZIP CODE West Hartford CT 06127 | | 3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General |

4. TYPE OF REPORT (Check here if this is a Termination Report.)

April 15 Quarterly Report February 20 June 20 October 20
 July 15 Quarterly Report March 20 July 20 November 20
 October 15 Quarterly Report April 20 August 20 December 20
 January 31 Year End Report May 20 September 20 January 31

Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on _____
on _____

IS THIS REPORT AN AMENDMENT YES NO

| | | |
|---------------------------|---------------------------|------------------------------|
| 5. COVERING PERIOD | FROM 10/01/2008 | THROUGH 10/31/2008 |
|---------------------------|---------------------------|------------------------------|

| SUMMARY | | |
|--|-------|-------------|
| 6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD | ..... | 515970.19 |
| 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) | ..... | 10982.58 |
| 8. SUBTOTAL (Lines 6 and 7) | ..... | 526952.77 |
| 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) | ..... | 6121.04 |
| 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) | ..... | 520831.73 |
| 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | ..... | 0.00 |
| 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | ..... | 558333.52 |
| 13. EXPENDITURES SUBJECT TO LIMITATION | ..... | 15118953.49 |
| NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES | | |
| 14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) | ..... | 9462828.20 |
| 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) | ..... | 15119493.49 |

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 Kathryn Damato | Date 11/20/2008 |
| Signature of Treasurer | |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact: Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

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

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

2 / 70

(PAGE 2, FEC FORM 3P)

| Name of committee (in full) Chris Dodd For President Inc | | Report Covering the Period From: 10/01/2008 To: 10/31/2008 | |
|--|----------|---|--|
| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) | 0.00 | 1961741.71 | |
| 17. CONTRIBUTIONS (other than loans) FROM : | | | |
| (a) Individuals/Persons Other Than Political Committees | 200.00 | 10084230.20 | |
| (b) Political Party Committees | 0.00 | 100.00 | |
| (c) Other Political Committees | 5000.00 | 750698.30 | |
| (d) The Candidate | 0.00 | 0.00 | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) | 5200.00 | 10835028.50 | |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 4739005.00 | |
| 19. LOANS RECEIVED: | | | |
| (a) Loans Received From or Guaranteed by Candidate | 0.00 | 0.00 | |
| (b) Other Loans | 0.00 | 1302811.25 | |
| (c) TOTAL LOANS (Add 19(a) and 19(b)) | 0.00 | 1302811.25 | |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) : | | | |
| (a) Operating | 5782.58 | 87687.02 | |
| (b) Fundraising | 0.00 | 540.00 | |
| (c) Legal and Accounting | 0.00 | 0.00 | |
| (d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) | 5782.58 | 88227.02 | |
| 21. OTHER RECEIPTS (Dividend, Interest, etc.) | 0.00 | 55536.06 | |
| 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) | 10982.58 | 18982349.54 | |
| II. DISBURSEMENTS | | | |
| 23. OPERATING EXPENDITURES | 6121.04 | 15207180.51 | |
| 24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 440110.00 | |
| 25. FUNDRAISING DISBURSEMENTS | 0.00 | 0.00 | |
| 26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS | 0.00 | 0.00 | |
| 27. LOAN REPAYMENTS MADE : | | | |
| (a) Repayment of Loans made or Guaranteed by Candidate | 0.00 | 0.00 | |
| (b) Other Repayments | 0.00 | 1302811.25 | |
| (c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) | 0.00 | 1302811.25 | |
| 28. REFUNDS OF CONTRIBUTIONS TO : | | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1194942.00 | |
| (b) Political Party Committees | 0.00 | 177258.30 | |
| (c) Other Political Committees | 0.00 | 0.00 | |
| (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) | 0.00 | 1372200.30 | |
| 29. OTHER DISBURSEMENTS | 0.00 | 6000.00 | |
| 30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) | 6121.04 | 18328302.06 | |
| III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.) | | | |
| 31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) | 0.00 | | |

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

3 / 70

| | | | | | |
|---|--|--|--|--|--|
| 1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc | | | | | |
| ADDRESS (number and street) PO Box 270701 | | | | | |
| CITY, STATE, and ZIP CODE West Hartford CT 06127 | | | 2. IDENTIFICATION NUMBER C00431379 | | |

ALLOCATION BY STATE

| STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE | STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE |
|----------------------|------------------------|--------------------------|----------------|------------------------|--------------------------|
| Alabama | 0.00 | 0.00 | Nebraska | 0.00 | 0.00 |
| Alaska | 0.00 | 0.00 | Nevada | 0.00 | 31412.23 |
| Arizona | 0.00 | 0.00 | New Hampshire | 0.00 | 695420.15 |
| Arkansas | 0.00 | 0.00 | New Jersey | 0.00 | 0.00 |
| California | 0.00 | 0.00 | New Mexico | 0.00 | 0.00 |
| Colorado | 0.00 | 0.00 | New York | 0.00 | 0.00 |
| Connecticut | 0.00 | 0.00 | North Carolina | 0.00 | 0.00 |
| Delaware | 0.00 | 0.00 | North Dakota | 0.00 | 0.00 |
| District of Columbia | 0.00 | 41.21 | Ohio | 0.00 | 0.00 |
| Florida | 0.00 | 0.00 | Oklahoma | 0.00 | 0.00 |
| Georgia | 0.00 | 0.00 | Oregon | 0.00 | 0.00 |
| Hawaii | 0.00 | 0.00 | Pennsylvania | 0.00 | 0.00 |
| Idaho | 0.00 | 0.00 | Rhode Island | 0.00 | 0.00 |
| Illinois | 0.00 | 0.00 | South Carolina | 0.00 | 533.78 |
| Indiana | 0.00 | 0.00 | South Dakota | 0.00 | 0.00 |
| Iowa | 0.00 | 2631426.17 | Tennessee | 0.00 | 0.00 |
| Kansas | 0.00 | 0.00 | Texas | 0.00 | 0.00 |
| Kentucky | 0.00 | 0.00 | Utah | 0.00 | 0.00 |
| Louisiana | 0.00 | 0.00 | Vermont | 0.00 | 0.00 |
| Maine | 0.00 | 0.00 | Virginia | 0.00 | 0.00 |
| Maryland | 0.00 | 68.00 | Washington | 0.00 | 0.00 |
| Massachussetts | 0.00 | 0.00 | West Virginia | 0.00 | 0.00 |
| Michigan | 0.00 | 0.00 | Wisconsin | 0.00 | 0.00 |
| Minnesota | 0.00 | 0.00 | Wyoming | 0.00 | 0.00 |
| Mississippi | 0.00 | 0.00 | Puerto Rico | 0.00 | 0.00 |
| Missouri | 0.00 | 0.00 | Guam | 0.00 | 0.00 |
| Montana | 0.00 | 0.00 | Virgin Islands | 0.00 | 0.00 |
| | | | TOTALS | 0.00 | 3358901.54 |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 4 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b |
| <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a |
| <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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)
Chris Dodd For President Inc

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) n/a Unitemized Donors | Date of Receipt |
| | Mailing Address | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| | City State Zip Code | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | <input type="text"/> 200.00 |
| | Name of Employer Occupation | Unitemized Donors |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ <input type="text"/> 200.00 | Transaction ID: UCB25BE7404D74997980 |

| | |
|--|-----------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 200.00 |
| TOTAL This Period (last page this line number only) | <input type="text"/> 200.00 |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 5 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input checked="" type="checkbox"/> 20a |
| | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d |
| | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c |
| | | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | |
|---|---|-------------------------------------|--|------------------------------------|
| A. | Full Name (Last, First, Middle Initial) New Millennium PAC | | Date of Receipt | |
| | Mailing Address P.O. Box 632 | | M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8 | |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Union City | NJ | 07087 | |
| | FEC ID number of contributing federal political committee. | | 5000.00 | |
| | Name of Employer | | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 5000.00 | | |

Transaction ID: A441276B4B469499FA21

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5000.00 |
| TOTAL This Period (last page this line number only) | 5000.00 |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input type="checkbox"/> 17a <input type="checkbox"/> 19b | <input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) American Express | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 981535 | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City State Zip Code El Paso TX 79998-1535 | | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | | 4852.58 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation | | Refund on charge | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: A44E8854043A042AFBEE | | | | | | | | | | | | | | | | | | | | |
| Election Cycle-to-Date ▼ 4852.58 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) State of Maryland | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 45 Calvert Street | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 4 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 1 | 0 | | 2 | 4 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City State Zip Code Annapolis MD 21401-1954 | | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | | 60.00 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation | | Excess Payment Refund | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: AC4213FF51032465EB89 | | | | | | | | | | | | | | | | | | | | |
| Election Cycle-to-Date ▼ 300.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Ms. Sheryl Cohen | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 2241 North Vermont Street | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City State Zip Code Arlington VA 22207-4032 | | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | | 500.00 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Chris Dodd for President Campaign Manager | | Purchase of Equipment | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: A7821638E5D514C0DB0F | | | | | | | | | | | | | | | | | | | | |
| Election Cycle-to-Date ▼ 500.00 | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5412.58 |
| TOTAL This Period (last page this line number only) | 5412.58 |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Payroll Processing Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BE76459A5C01A47A18B7</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 96.75</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B771A8DACEC40416A83A</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 76.98</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 830175 Acct Analysis</p> <p>City Dallas State TX Zip Code 75283-0175</p> <p>Purpose of Disbursement Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B5154422B35894E03965</p> <p>Date of Disbursement 10 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 26.56</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

200.29

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B93A4E59C717A41349A3 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 129.17 |
| B. | Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BC036D24B710347C0820 Date of Disbursement 10 / 15 / 2008 Amount of Each Disbursement this Period 129.17 |
| C. | Full Name (Last, First, Middle Initial) IRS Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B000962B1999D45ADBA3 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 934.26 |

SUBTOTAL of Disbursements This Page (optional)

1192.60

TOTAL This Period (last page this line number only)

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1101 Penn Avenue | | | |
| City Scranton | State PA | ZIP Code 18509 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 2327.31 | | Transaction ID: D0A1C9B9020DA4F7F9B3 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2327.31 | |

| | | | |
|---|-------------|-------------------|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1101 Penn Avenue | | | |
| City Scranton | State PA | ZIP Code 18509 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 411.45 | | Transaction ID: D0B46426F11F0465B888 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 411.45 | |

| | | | |
|---|-------------|-------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1101 Penn Avenue | | | |
| City Scranton | State PA | ZIP Code 18509 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 348.36 | | Transaction ID: D68AD64DCDC624C69A94 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 348.36 | |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 3087.12 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc. | | | Nature of Debt (Purpose): Media Services |
| Mailing Address 2150 Post Road | | | |
| City Fairfield | State CT | ZIP Code 06824 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D018D6F8488CD4328B41 | |
| 500.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 500.00 | |

| | | | |
|--|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Immediacy Group | | | Nature of Debt (Purpose): Television |
| Mailing Address 1800 S Street | | | |
| City Washington | State DC | ZIP Code 20009 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D4C86C8799F3445D78A5 | |
| 45000.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 45000.00 | |

| | | | |
|--|-------------|-------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Immediacy Group | | | Nature of Debt (Purpose): Television |
| Mailing Address 1800 S Street | | | |
| City Washington | State DC | ZIP Code 20009 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D6EC88DE849224213A22 | |
| 65000.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 65000.00 | |

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|--|---|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 110500.00 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|--------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Newman and Leventhal Caterers, Inc. | | | Nature of Debt (Purpose): Caterer |
| Mailing Address 45 West 81st Street | | | |
| City New York | State NY | ZIP Code 10024-6025 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 2136.07 | | Transaction ID: D2FDEA7A6FB3F461FA7F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2136.07 | |

| | | | |
|--|-------------|-------------------|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1739 East Grand Avenue | | | |
| City Des Moines | State IA | ZIP Code 50316 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 7233.31 | | Transaction ID: D3239DDE2C2B14D02B40 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 7233.31 | |

| | | | |
|---|-------------|-------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Dubuque Leader | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1527 Central Avenue | | | |
| City Dubuque | State IA | ZIP Code 52004 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 360.50 | | Transaction ID: D308E0032B374413E8A3 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 360.50 | |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 9729.88 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Immediacy Group | | | Nature of Debt (Purpose): Television |
| Mailing Address 1800 S Street | | | |
| City Washington | State DC | ZIP Code 20009 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 50000.00 | | Transaction ID: DE079EBE7C9854073A8E | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 50000.00 | |

| | | | |
|---|-------------|-------------------|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1101 Penn Avenue | | | |
| City Scranton | State PA | ZIP Code 18509 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 485.08 | | Transaction ID: DC5C4695FC2C6478F875 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 485.08 | |

| | | | |
|---|-------------|-------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC | | | Nature of Debt (Purpose): Printing |
| Mailing Address 1101 Penn Avenue | | | |
| City Scranton | State PA | ZIP Code 18509 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 3708.25 | | Transaction ID: D89306888B7864931B8A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3708.25 | |

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|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 54193.33 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
 (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|------------------------|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ExxonMobil | | | Nature of Debt (Purpose): Gasoline |
| Mailing Address P.O. Box 688938 | | | |
| City Des Moines | State IA | ZIP Code 50368-8938 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 429.36 | | Transaction ID: D2591D51138CC454BA3F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 429.36 | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ExxonMobil | | | Nature of Debt (Purpose): Gasoline |
| Mailing Address P.O. Box 688938 | | | |
| City Des Moines | State IA | ZIP Code 50368-8938 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 241.86 | | Transaction ID: D303F42DD72104352BB3 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 241.86 | |

| | | | |
|---|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq | | | Nature of Debt (Purpose): Telephone |
| Mailing Address PO Box 660068 | | | |
| City Dallas | State TX | ZIP Code 75266 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1064.16 | | Transaction ID: DBF0B293CD60A40ED8E0 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1064.16 | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1735.38 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
 (check only one) 11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq | | | Nature of Debt (Purpose): Telephone |
| Mailing Address PO Box 660068 | | | |
| City Dallas | State TX | ZIP Code 75266 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="378.82"/> | | Transaction ID: DF4A4422265684FB29B9 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="378.82"/> | |

| | | | |
|---|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 8110 | | | |
| City Aurora | State IL | ZIP Code 60572 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="1055.11"/> | | Transaction ID: D561E5E0579E7422A8F4 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1055.11"/> | |

| | | | |
|---|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 8110 | | | |
| City Aurora | State IL | ZIP Code 60572 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="304.30"/> | | Transaction ID: DD45DB76A7149485EADE | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="304.30"/> | |

| | |
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| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1738.23"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 16 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 8110 | |
| City State ZIP Code Aurora IL 60572 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 1861.62 | Transaction ID: DFE38B3A3574543178FC | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1861.62 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waste Management | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 756 | |
| City State ZIP Code Des Moines IA 50303 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 149.94 | Transaction ID: D26D95FA926E146209F5 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 149.94 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waste Management | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 756 | |
| City State ZIP Code Des Moines IA 50303 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 266.02 | Transaction ID: D13EE948ED74B4BE0B66 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 266.02 |

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|--|----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 2277.58 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | Nature of Debt (Purpose): Legal Services |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | |
| City State ZIP Code Seattle WA 98101-3099 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 25037.09 | Transaction ID: D2550339EB07C40E994D | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 25037.09 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | Nature of Debt (Purpose): Legal Services |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | |
| City State ZIP Code Seattle WA 98101-3099 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 25233.00 | Transaction ID: DDAAD6917DA7140B1B6D | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 25233.00 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | Nature of Debt (Purpose): Legal Services |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | |
| City State ZIP Code Seattle WA 98101-3099 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 25134.72 | Transaction ID: D2900156C49674E41A2B | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 25134.72 |

| | | |
|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 75404.81 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
 11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | Nature of Debt (Purpose): Legal Services |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | |
| City State ZIP Code Seattle WA 98101-3099 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 20016.20 | Transaction ID: D14FCCBCA21B449EB877 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 20016.20 |

| | |
|--|-------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers | Nature of Debt (Purpose): Copier |
| Mailing Address 325 Grand Avenue P.O. Box 1755 | |
| City State ZIP Code Des Moines IA 50306 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period 126.82 | Transaction ID: DFAE4308D10124EEDA3 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 126.82 |

| | |
|--|-------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers | Nature of Debt (Purpose): Copier |
| Mailing Address 325 Grand Avenue P.O. Box 1755 | |
| City State ZIP Code Des Moines IA 50306 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 211.99 | Transaction ID: D3C51D93654FD40B59BB | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 211.99 |

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|--|------------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ 20355.01 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | | | |
| City Irvine | State CA | ZIP Code 92618-4201 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 561.93 | | Transaction ID: DA1C685B9BFAF4CD7A76 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 561.93 | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | | | |
| City Irvine | State CA | ZIP Code 92618-4201 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 281.01 | | Transaction ID: DB59E8AD1B4CC46098EF | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 281.01 | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | | | |
| City Irvine | State CA | ZIP Code 92618-4201 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 153.03 | | Transaction ID: D40B8D89E3ABE4545B3C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 153.03 | |

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|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 995.97 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | |
| City State ZIP Code Irvine CA 92618-4201 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 285.25 | Transaction ID: D59D402EB48494DF2B2C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 285.25 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | |
| City State ZIP Code Irvine CA 92618-4201 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 660.55 | Transaction ID: D0F58D7FEFA5B4E43939 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 660.55 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | |
| City State ZIP Code Irvine CA 92618-4201 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 625.92 | Transaction ID: D7AA61021F4A546ABB58 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 625.92 |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1571.72 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Monthly Phone Charges |
| Mailing Address 8808 Irvine Center Drive | | | |
| City Irvine | State CA | ZIP Code 92618-4201 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 364.55 | | Transaction ID: DC3EE07A89ADF414596B | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 364.55 | |

| | | | |
|---|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ABC-Electrical Contractors | | | Nature of Debt (Purpose): Phone Work |
| Mailing Address 10520 Hickman Road Suite ABC | | | |
| City Des Moines | State IA | ZIP Code 50325 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1866.01 | | Transaction ID: DADFAFC251E1148F6B40 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1866.01 | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Simard Printing | | | Nature of Debt (Purpose): Printing Services |
| Mailing Address 300 Salem Street | | | |
| City Woburn | State MA | ZIP Code 01801-2055 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 433.13 | | Transaction ID: DAEB900B19D5343069F1 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 433.13 | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 2663.69 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Old Town Family Restaurant | | | Nature of Debt (Purpose): Food & Beverage |
| Mailing Address 2107 Camanche Avenue | | | |
| City Clinton | State IA | ZIP Code 52732-6036 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="130.00"/> | | Transaction ID: D8B59DA12044449C0AE9 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="130.00"/> | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MoreSound Company | | | Nature of Debt (Purpose): Sound Equipment |
| Mailing Address 102 North Street | | | |
| City Jaffrey | State NH | ZIP Code 03452-5301 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="400.00"/> | | Transaction ID: D4310E2A2AC3D49AFB1C | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="400.00"/> | |

| | | | |
|---|-------------|-------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Washington Promotions & Printing | | | Nature of Debt (Purpose): Printing |
| Mailing Address 5125 MacArthur Blvd. NW Suite 14 | | | |
| City Washington | State DC | ZIP Code 20016 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="5547.90"/> | | Transaction ID: DE815690D20EF4A6EB02 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="5547.90"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="6077.90"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | Nature of Debt (Purpose): Shipping |
| Mailing Address PO Box 7247-0244 | |
| City Philadelphia State PA ZIP Code 19170 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 434.09 | Transaction ID: D93A99FFBC04A4242996 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 434.09 |

| | |
|--|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | Nature of Debt (Purpose): Shipping |
| Mailing Address PO Box 7247-0244 | |
| City Philadelphia State PA ZIP Code 19170 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 60.76 | Transaction ID: D6EB2D896D8C64BA8AA9 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 60.76 |

| | |
|--|--------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | Nature of Debt (Purpose): Shippng |
| Mailing Address PO Box 7247-0244 | |
| City Philadelphia State PA ZIP Code 19170 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 126.91 | Transaction ID: D46BD2137637F4679A43 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 126.91 |

| | |
|--|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | 621.76 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 24 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | | | | | |
|---|---------------------------------------|----------|----------|--------------|----|-------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | Nature of Debt (Purpose): Shipping | | | | | | |
| Mailing Address PO Box 7247-0244 | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Philadelphia</td> <td>PA</td> <td>19170</td> </tr> </table> | City | State | ZIP Code | Philadelphia | PA | 19170 | |
| City | State | ZIP Code | | | | | |
| Philadelphia | PA | 19170 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="427.18"/> | Transaction ID: DC7364FE5C9E54CCCA73 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="427.18"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="427.18"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="427.18"/> | | | | | |

| | | | | | | | |
|---|--|----------|----------|--------------|----|-------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedar Rapids Municipal Utilities | Nature of Debt (Purpose): Utilities | | | | | | |
| Mailing Address PO Box 3255 | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Cedar Rapids</td> <td>IA</td> <td>52406</td> </tr> </table> | City | State | ZIP Code | Cedar Rapids | IA | 52406 | |
| City | State | ZIP Code | | | | | |
| Cedar Rapids | IA | 52406 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="165.81"/> | Transaction ID: D9457B91CEE0540E8A08 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="165.81"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="165.81"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="165.81"/> | | | | | |

| | | | | | | | |
|---|--|------------|----------|-----------|----|------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kilkenney's | Nature of Debt (Purpose): Food & Beverage | | | | | | |
| Mailing Address 300 West 3rd Street | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Davenport</td> <td>IA</td> <td>52801-1208</td> </tr> </table> | City | State | ZIP Code | Davenport | IA | 52801-1208 | |
| City | State | ZIP Code | | | | | |
| Davenport | IA | 52801-1208 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="220.00"/> | Transaction ID: DE9F171102B294984BCD | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="220.00"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="220.00"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="220.00"/> | | | | | |

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|--|--|
| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="812.99"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cox Communications | | | Nature of Debt (Purpose): Internet Services |
| Mailing Address PO Box 6059 | | | |
| City Cypress | State CA | ZIP Code 90630 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DEAEBC41D358C496EAEB | |
| 138.02 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 138.02 | |

| | | | |
|--|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Frontline Productions | | | Nature of Debt (Purpose): Lighting & Video |
| Mailing Address 125 Hemlock Drive | | | |
| City Deep River | State CT | ZIP Code 06417 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DF269F8B8076845BAB94 | |
| 885.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 885.00 | |

| | | | |
|--|-------------|-------------------|------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Heartland Flagpoles and Flags | | | Nature of Debt (Purpose): Flags |
| Mailing Address 3719 SW 9th Street | | | |
| City Des Moines | State IA | ZIP Code 50315 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D42D026888D4F47D198F | |
| 436.60 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 436.60 | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1459.62 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geoff Luxenberg | | | Nature of Debt (Purpose): Reimbursement for Gas/Payment for signat |
| Mailing Address 249A New State Road | | | |
| City Manchester | State CT | ZIP Code 06042-7959 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="107.00"/> | | Transaction ID: D3BEB98490D8F4B87A07 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="107.00"/> | |

| | | | |
|--|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Express Inc. | | | Nature of Debt (Purpose): Courier Services |
| Mailing Address 3240 Hubbard Road | | | |
| City Landover | State MD | ZIP Code 20785 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="160.24"/> | | Transaction ID: D80871DA60A7642ADAA1 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="160.24"/> | |

| | | | |
|---|-------------|-------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc. | | | Nature of Debt (Purpose): Media Services |
| Mailing Address 2150 Post Road | | | |
| City Fairfield | State CT | ZIP Code 06824 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="500.00"/> | | Transaction ID: D421D5108046A4FA4973 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="500.00"/> | |

| | |
|--|-------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="767.24"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | | |
|---|--------------------------------------|----|
| (Use separate schedule(s) for each numbered line) | PAGE 27 / 70 | |
| | FOR LINE NUMBER: (check only one) | |
| | <input type="checkbox"/> | 11 |
| | <input checked="" type="checkbox"/> | 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc. | Nature of Debt (Purpose): Media Services |
| Mailing Address 2150 Post Road | |
| City State ZIP Code Fairfield CT 06824 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 500.00 | Transaction ID: D80E35642DA924E9798A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 500.00 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc. | Nature of Debt (Purpose): Media Services |
| Mailing Address 2150 Post Road | |
| City State ZIP Code Fairfield CT 06824 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 500.00 | Transaction ID: DF1403972FFAD472384D | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 500.00 |

| | |
|--|-----------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verham News | Nature of Debt (Purpose): Rent |
| Mailing Address P.O. Box 706 | |
| City State ZIP Code White Riv Jct VT 05001-0706 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 910.28 | Transaction ID: DE2E3D979014F4B2194A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 910.28 |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1910.28 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast | | | Nature of Debt (Purpose): Cable & Internet |
| Mailing Address PO Box 1577 | | | |
| City Newark | State NJ | ZIP Code 07101 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="351.30"/> | | Transaction ID: D3A3A16E658A34B44B21 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="351.30"/> | |

| | | | |
|--|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast | | | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 1577 | | | |
| City Newark | State NJ | ZIP Code 07101 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="513.74"/> | | Transaction ID: D054E2AB68F284AAA9A7 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="513.74"/> | |

| | | | |
|--|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COVAD | | | Nature of Debt (Purpose): Internet Services |
| Mailing Address Dept. 33408 PO BOX 39000 | | | |
| City San Francisco | State CA | ZIP Code 94139 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="1056.76"/> | | Transaction ID: D7FB209F7C488450BA73 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1056.76"/> | |

| | |
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| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1921.80"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 29 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor COVAD | Nature of Debt (Purpose): Internet Services |
| Mailing Address Dept. 33408 PO BOX 39000 | |
| City State ZIP Code San Francisco CA 94139 | |

| | |
|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1535.76"/> | Transaction ID: D5E78BD6138D849C8A7B |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| | Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="1535.76"/> |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Interstate Power and Light Co. | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 5007 | |
| City State ZIP Code Dubuque IA 52004-5007 | |

| | |
|---|---|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="250.36"/> | Transaction ID: DF8C3EA191F814F5C94C |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| | Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="250.36"/> |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Free Media, Inc. | Nature of Debt (Purpose): Reimbursement for Phone Expenses |
| Mailing Address 777 West End Avenue #5C | |
| City State ZIP Code New York NY 10025 | |

| | |
|---|---|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="150.09"/> | Transaction ID: D142C4EE26CC3459DA22 |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| | Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="150.09"/> |

| | |
|--|---|
| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="1936.21"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Free Media, Inc. | Nature of Debt (Purpose): Reimbursement for Travel Expenses |
| Mailing Address 777 West End Avenue #5C | |
| City New York State NY ZIP Code 10025 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 635.01 | Transaction ID: DF03B1B1603F54C5183C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 635.01 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Travelers | Nature of Debt (Purpose): Insurance |
| Mailing Address CL & Specialty Remittance Center Remittance Box 96359 | |
| City Hartford State CT ZIP Code 06183-1008 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 9619.00 | Transaction ID: D490B4AF8A85D4E99B96 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 9619.00 |

| | |
|--|------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Home Front Communications | Nature of Debt (Purpose): Video |
| Mailing Address 1121 14th Street NW | |
| City Washington State DC ZIP Code 20005-5641 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 6000.00 | Transaction ID: D9C275736AC4E46B69DC | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 6000.00 |

| | |
|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 16254.01 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Telegraph | | | Nature of Debt (Purpose): Subscription |
| Mailing Address PO Box 1008 | | | |
| City Nashua | State NH | ZIP Code 03061 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 20.81 | | Transaction ID: D1D76CBB4EBC7498F81D | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 20.81 | |

| | | | |
|--|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | | | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | | | |
| City Seattle | State WA | ZIP Code 98111 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 474.82 | | Transaction ID: DD4C14996C4ED457DBEB | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 474.82 | |

| | | | |
|--|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | | | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | | | |
| City Seattle | State WA | ZIP Code 98111 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1062.75 | | Transaction ID: D61C348CBB0624AED874 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1062.75 | |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1558.38 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 669.82 | Transaction ID: D6224518C358E4E34936 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 669.82 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 418.15 | Transaction ID: DA397374A80A8418D9FD | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 418.15 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 657.85 | Transaction ID: D160BB52601F3469FBFA | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 657.85 |

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|--|----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1745.82 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 575.42 | Transaction ID: DA3182C7E844C4F039CE | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 575.42 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 58.58 | Transaction ID: DC07FD8583E3F4BA58CA | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 58.58 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 677.36 | Transaction ID: DF660180FF5C543E886F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 677.36 |

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|--|----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1311.36 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 106.73 | Transaction ID: DE2EA2BD913EF4C59A0F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 106.73 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 431.46 | Transaction ID: D703363A20B0E44A7A6C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 431.46 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 471.50 | Transaction ID: DE70EBFB35F4E4F5BBA8 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 471.50 |

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|--|----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1009.69 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest | Nature of Debt (Purpose): Telephone |
| Mailing Address Business Services PO Box 91154 | |
| City State ZIP Code Seattle WA 98111 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 622.51 | Transaction ID: DA75CCBF704CB4716B86 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 622.51 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | |
| City State ZIP Code Cedar Rapids IA 52406 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 540.80 | Transaction ID: D4DB84BA83BD34248B12 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 540.80 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | |
| City State ZIP Code Cedar Rapids IA 52406 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 401.72 | Transaction ID: D5B3618F71E3745EC9DD | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 401.72 |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1565.03 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | | | |
| City Cedar Rapids | State IA | ZIP Code 52406 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="852.59"/> | | Transaction ID: D21C371285AF1401F9CB | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="852.59"/> | |

| | | | |
|---|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | | | |
| City Cedar Rapids | State IA | ZIP Code 52406 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="263.55"/> | | Transaction ID: DBA39930B48064589AB5 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="263.55"/> | |

| | | | |
|---|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | | | |
| City Cedar Rapids | State IA | ZIP Code 52406 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="50.75"/> | | Transaction ID: DF36117C0589D4D9C911 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="50.75"/> | |

| | |
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| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1166.89"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 37 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | |
| City Cedar Rapids State IA ZIP Code 52406 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 877.55 | Transaction ID: D6F4061A34DE04783A3F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 877.55 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | |
| City Cedar Rapids State IA ZIP Code 52406 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 239.60 | Transaction ID: DE6029EBE091B415FB6D | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 239.60 |

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|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3066 | |
| City Cedar Rapids State IA ZIP Code 52406 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 254.12 | Transaction ID: D637921B16CAA45B19B6 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 254.12 |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1371.27 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 38 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Allied Telecom | Nature of Debt (Purpose): Internet Services |
| Mailing Address PO BOX 758792 | |
| City State ZIP Code Baltimore MD 21275 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 850.00 | Transaction ID: DEA9D9C89FC7F444DAD8 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 850.00 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 360 | |
| City State ZIP Code Manchester NH 03105-0360 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 246.08 | Transaction ID: DE82D6F912C4D47CB9A5 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 246.08 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 360 | |
| City State ZIP Code Manchester NH 03105-0360 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 376.44 | Transaction ID: DD1D454DB157C4318B67 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 376.44 |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1472.52 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
 (check only one) 11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 360 | | | |
| City Manchester | State NH | ZIP Code 03105-0360 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="993.78"/> | | Transaction ID: D5B30D2CCB1A941208DC | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="993.78"/> | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 360 | | | |
| City Manchester | State NH | ZIP Code 03105-0360 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="131.82"/> | | Transaction ID: D5B0C3B4DA75E4096B6A | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="131.82"/> | |

| | | | |
|---|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Operations UnLimited, Inc. | | | Nature of Debt (Purpose): Office Operations |
| Mailing Address 113 Hilands Place | | | |
| City Pittsburgh | State PA | ZIP Code 15237 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="280.00"/> | | Transaction ID: D7C7D4BF737944E5A9A0 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="280.00"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1405.60"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Operations UnLimited, Inc. | | | Nature of Debt (Purpose): Office Operations Consulting |
| Mailing Address 113 Hilands Place | | | |
| City Pittsburgh | State PA | ZIP Code 15237 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="2928.11"/> | | Transaction ID: D0126046A41F34134AE6 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="2928.11"/> | |

| | | | |
|--|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pentimento Design LLC | | | Nature of Debt (Purpose): Reindeer decorations |
| Mailing Address 1133 Mapleton Avenue | | | |
| City Suffield | State CT | ZIP Code 06078 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="212.00"/> | | Transaction ID: DF4C1AA581F164ADAB6A | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="212.00"/> | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mason City Public Utilities | | | Nature of Debt (Purpose): Utilities |
| Mailing Address 10 First Street Northwest | | | |
| City Mason City | State IA | ZIP Code 50401-3224 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="123.36"/> | | Transaction ID: DDE7D15C566704EE4997 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="123.36"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="3263.47"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast | | | Nature of Debt (Purpose): Cable |
| Mailing Address P.O. Box 3005 | | | |
| City Southeastern | State PA | ZIP Code 19398-3005 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="130.78"/> | | Transaction ID: D77C21BCA099B4529A8B | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="130.78"/> | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast | | | Nature of Debt (Purpose): Cable Service |
| Mailing Address P.O. Box 3005 | | | |
| City Southeastern | State PA | ZIP Code 19398-3005 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="197.56"/> | | Transaction ID: D1327435AF7974016BBD | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="197.56"/> | |

| | | | |
|--|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Telephone |
| Mailing Address PO Box 660720 | | | |
| City Dallas | State TX | ZIP Code 75266 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="6277.73"/> | | Transaction ID: D0A801840ADAA424FBF4 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="6277.73"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="6606.07"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 42 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | | | | | |
|---|---|----------|----------|--------|----|-------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | Nature of Debt (Purpose): Telephone | | | | | | |
| Mailing Address PO Box 660720 | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Dallas</td> <td>TX</td> <td>75266</td> </tr> </table> | City | State | ZIP Code | Dallas | TX | 75266 | |
| City | State | ZIP Code | | | | | |
| Dallas | TX | 75266 | | | | | |

| | | | | | | | |
|---|--|---|---|--|--|---|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="22.28"/> | Transaction ID: DF9E84213BC0C4FA4959 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="22.28"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="22.28"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="22.28"/> | | | | | |

| | | | | | | | |
|---|--|------------|----------|---------|----|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VFW Post 775 | Nature of Debt (Purpose): Space Rental | | | | | | |
| Mailing Address 702 West Main Street | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Ottumwa</td> <td>IA</td> <td>52501-2226</td> </tr> </table> | City | State | ZIP Code | Ottumwa | IA | 52501-2226 | |
| City | State | ZIP Code | | | | | |
| Ottumwa | IA | 52501-2226 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="150.00"/> | Transaction ID: D9F4487EF4F6F4DB6923 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="150.00"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="150.00"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="150.00"/> | | | | | |

| | | | | | | | |
|---|---|------------|----------|-----------|----|------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | Nature of Debt (Purpose): Telephone | | | | | | |
| Mailing Address P.O. Box 15041 | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Worcester</td> <td>MA</td> <td>01615-0023</td> </tr> </table> | City | State | ZIP Code | Worcester | MA | 01615-0023 | |
| City | State | ZIP Code | | | | | |
| Worcester | MA | 01615-0023 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="896.07"/> | Transaction ID: D03866EA927C6487BAA8 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="896.07"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="896.07"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="896.07"/> | | | | | |

| | |
|--|---|
| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="1068.35"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 15041 | | | |
| City Worcester | State MA | ZIP Code 01615-0023 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 983.75 | | Transaction ID: DAC79A50A402441AB9DA | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 983.75 | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 15041 | | | |
| City Worcester | State MA | ZIP Code 01615-0023 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 320.68 | | Transaction ID: DAB48C0D1D9BF48E2819 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 320.68 | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 15041 | | | |
| City Worcester | State MA | ZIP Code 01615-0023 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 694.96 | | Transaction ID: D7AA2635D35294D99959 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 694.96 | |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1999.39 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 15041 | | | |
| City Worcester | State MA | ZIP Code 01615-0023 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 647.11 | | Transaction ID: DC05308729895455AAF0 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 647.11 | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 15041 | | | |
| City Worcester | State MA | ZIP Code 01615-0023 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1646.22 | | Transaction ID: D684E05F5028F4B9FA8C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1646.22 | |

| | | | |
|---|-------------|-------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Des Moines Theatrical Shop | | | Nature of Debt (Purpose): Costume Rental |
| Mailing Address 145 5th Street | | | |
| City West Des Moines | State IA | ZIP Code 50265 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 106.00 | | Transaction ID: D7952AAF64B9C4F0997B | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 106.00 | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 2399.33 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Des Moines Water Works | Nature of Debt (Purpose): Utilities |
| Mailing Address 2201 George Flagg Parkway | |
| City State ZIP Code Des Moines IA 50321-1190 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 117.91 | Transaction ID: D1475748209CF4A0092F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 117.91 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor REMAX Results Realty | Nature of Debt (Purpose): Rent and Utilities |
| Mailing Address 202 1st NW | |
| City State ZIP Code Mason City IA 50401 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 1036.46 | Transaction ID: D14F42980C9EF465D8A0 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1036.46 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jocelyn Augustino Photogrpaher | Nature of Debt (Purpose): Photographer |
| Mailing Address 3416 Gunston Road | |
| City State ZIP Code Alexandria VA 22302-2134 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 69.00 | Transaction ID: D0781506CE4AC48A0805 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 69.00 |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1223.37 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Deaf Services Unlimited | | | Nature of Debt (Purpose): Interpreting Service |
| Mailing Address Suite 170 | | | |
| City Des Moines | State IA | ZIP Code 50309 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DF8A44964B3424CC3B77 | |
| 130.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 130.00 | |

| | | | |
|--|-------------|-------------------|--------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Extra Space Storage | | | Nature of Debt (Purpose): Storage |
| Mailing Address 132 Silas Deane Highway | | | |
| City Wethersfield | State CT | ZIP Code 06109 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DAA10574E87F546189CE | |
| 89.04 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 89.04 | |

| | | | |
|---|-------------|-------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Drink More Water | | | Nature of Debt (Purpose): Water Delivery |
| Mailing Address Montgomery County Airpark 7595-A Rickenbacker Drive | | | |
| City Gaithersburg | State MD | ZIP Code 20879 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DCDE895EA2CFC4A338ED | |
| 32.50 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 32.50 | |

| | | |
|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 251.54 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 47 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | | | | | |
|---|--|------------|----------|-------|----|------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NexGen | Nature of Debt (Purpose): Utilities | | | | | | |
| Mailing Address 10500 Hickman Road Ste J | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 34%;">ZIP Code</td> </tr> <tr> <td>Clive</td> <td>IA</td> <td>50325-3706</td> </tr> </table> | City | State | ZIP Code | Clive | IA | 50325-3706 | |
| City | State | ZIP Code | | | | | |
| Clive | IA | 50325-3706 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--------------|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="224.86"/> | Transaction ID: D2FBA9339003447 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="224.86"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="224.86"/> | ADB22 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="224.86"/> | | | | | |

| | | | | | | | |
|--|------------------------------------|------------|----------|--------------|----|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mediacom | Nature of Debt (Purpose): Cable | | | | | | |
| Mailing Address P.O. Box 5744 | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 34%;">ZIP Code</td> </tr> <tr> <td>Carol Stream</td> <td>IL</td> <td>60197-5744</td> </tr> </table> | City | State | ZIP Code | Carol Stream | IL | 60197-5744 | |
| City | State | ZIP Code | | | | | |
| Carol Stream | IL | 60197-5744 | | | | | |

| | | | | | | | |
|---|--|---|---|--|--|---|---------------|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="19.14"/> | Transaction ID: DBAEE80A9C8F14 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="19.14"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="19.14"/> | CBF964 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="19.14"/> | | | | | |

| | | | | | | | |
|--|------------------------------------|------------|----------|--------------|----|------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mediacom | Nature of Debt (Purpose): Cable | | | | | | |
| Mailing Address P.O. Box 5744 | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 34%;">ZIP Code</td> </tr> <tr> <td>Carol Stream</td> <td>IL</td> <td>60197-5744</td> </tr> </table> | City | State | ZIP Code | Carol Stream | IL | 60197-5744 | |
| City | State | ZIP Code | | | | | |
| Carol Stream | IL | 60197-5744 | | | | | |

| | | | | | | | |
|---|--|---|---|--|--|---|--------------|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="92.37"/> | Transaction ID: D34D4235A01F441 | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="92.37"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="92.37"/> | BAA58 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="92.37"/> | | | | | |

| | |
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| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="336.37"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WHO Newsradio 1040 | Nature of Debt (Purpose): Recording Services |
| Mailing Address 2141 Grand Avenue | |
| City State ZIP Code Des Moines IA 50312 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 400.00 | Transaction ID: D5CA66406DA5143F7848 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 400.00 |

| | |
|--|------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Big Ten Rentals, Inc. | Nature of Debt (Purpose): Bases |
| Mailing Address 1820 Boyrum St | |
| City State ZIP Code Iowa City IA 52240-4555 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 34.82 | Transaction ID: D9CE80039AE0F470B870 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 34.82 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DC Treasurer | Nature of Debt (Purpose): Parking Fine |
| Mailing Address Adjudication Services PO Box 2014 | |
| City State ZIP Code Washington DC 20013 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 5.00 | Transaction ID: DF17F5AFCCC744C43A1E | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 5.00 |

| | |
|--|---------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 439.82 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Storefront Political Media | | | Nature of Debt (Purpose): Photographer |
| Mailing Address 250 Sutter Street, Suite 650 | | | |
| City San Francisco | State CA | ZIP Code 94108 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 537.08 | | Transaction ID: DDB39DC1EDB03445B8B5 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 537.08 | |

| | | | |
|---|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bi-State Cartridge Service, Inc. | | | Nature of Debt (Purpose): Office Supplies |
| Mailing Address 1325 15th Street | | | |
| City Moline | State IL | ZIP Code 61265 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 130.54 | | Transaction ID: D163D453900874450889 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 130.54 | |

| | | | |
|--|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV | | | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 60036 | | | |
| City Los Angeles | State CA | ZIP Code 90060 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 75.40 | | Transaction ID: D01F431A133824BDFB8A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 75.40 | |

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|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 743.02 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | | |
|---|-------------------------------------|----|
| (Use separate schedule(s) for each numbered line) | PAGE 50 / 70 | |
| | FOR LINE NUMBER: (check only one) | |
| | <input type="checkbox"/> | 11 |
| | <input checked="" type="checkbox"/> | 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 60036 | |
| City State ZIP Code Los Angeles CA 90060 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 166.33 | Transaction ID: D8A78FBAECFAE431F9D3 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 166.33 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 60036 | |
| City State ZIP Code Los Angeles CA 90060 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 44.26 | Transaction ID: DBC6FF85AE35C41E68CA | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 44.26 |

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|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 60036 | |
| City State ZIP Code Los Angeles CA 90060 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 32.22 | Transaction ID: D98583EF190B742F4B0A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 32.22 |

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|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 242.81 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Air Charter Team, Inc. | Nature of Debt (Purpose): Transportation |
| Mailing Address 10015 N.W. Ambassador Drive Suite 202 | |
| City State ZIP Code Kansas City MO 64153 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 1304.61 | Transaction ID: DCAA2DBC5CEA94CD089C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1304.61 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zahara's Cafe & Bakery, Inc. | Nature of Debt (Purpose): Food & Beverage |
| Mailing Address 525 Washington Blvd, 2nd Flr | |
| City State ZIP Code Jersey City NJ 07310 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 2500.00 | Transaction ID: DD281F4AE8DC34BC7B93 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2500.00 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hinckley Springs | Nature of Debt (Purpose): Water Cooler Services |
| Mailing Address P.O. Box 660579 | |
| City State ZIP Code Dallas TX 75266-0579 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 306.68 | Transaction ID: DE674F26EC06645DDB95 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 306.68 |

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| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 4111.29 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan | | | Nature of Debt (Purpose): Utilities |
| Mailing Address 52 Second Avenue | | | |
| City Waltham | State MA | ZIP Code 02451 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1481.16 | | Transaction ID: DDF A00C779CF445C8AA6 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1481.16 | |

| | | | |
|--|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan | | | Nature of Debt (Purpose): Utilities |
| Mailing Address 52 Second Avenue | | | |
| City Waltham | State MA | ZIP Code 02451 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 239.04 | | Transaction ID: DD0258CA80C884AB6960 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 239.04 | |

| | | | |
|--|-------------|-------------------|--------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Printer Works | | | Nature of Debt (Purpose): Printer |
| Mailing Address 3481 Arden Road | | | |
| City Hayward | State CA | ZIP Code 94545 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 819.44 | | Transaction ID: DFC2998A4374B4E86BCA | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 819.44 | |

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|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 2539.64 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DEC21CC9229D5404F97B | |
| 1115.75 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 1115.75 | |

| | | | |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D2F929A7374FC4A50B84 | |
| 78.77 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 78.77 | |

| | | | |
|---|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D275E706E6F7F4C6C938 | |
| 72.04 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 72.04 | |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1266.56 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DFC448EB6B1054323A65 | |
| 659.58 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 659.58 | |

| | | | |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DAB442CA849544E83A13 | |
| 196.90 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 196.90 | |

| | | | |
|---|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D91E4CB1724CB455C94A | |
| 416.01 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 416.01 | |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1272.49 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 55 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | |
| City State ZIP Code Davenport IA 52808-8020 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="65.24"/> | Transaction ID: D7B3E6DAFE5CE4AFB9B8 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="65.24"/> |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | |
| City State ZIP Code Davenport IA 52808-8020 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1406.57"/> | Transaction ID: DB92957A464EF4AC685D | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1406.57"/> |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | |
| City State ZIP Code Davenport IA 52808-8020 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="123.36"/> | Transaction ID: DF30D747F375F47E5882 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="123.36"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1595.17"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy | | | Nature of Debt (Purpose): Utilities |
| Mailing Address P.O. Box 8020 | | | |
| City Davenport | State IA | ZIP Code 52808-8020 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 811.87 | | Transaction ID: DF6D9496BDF604118AD8 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 811.87 | |

| | | | |
|--|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Peter Nichols | | | Nature of Debt (Purpose): Consulting Fee |
| Mailing Address 222 Stony Brook Road | | | |
| City Hopewell | State NJ | ZIP Code 08525-3003 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 15000.00 | | Transaction ID: DE18E31E6A6564CF4B75 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 15000.00 | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jim VanDusseldorp | | | Nature of Debt (Purpose): Bus Servicing |
| Mailing Address 2406 15th Ave. N. | | | |
| City Clear Lake | State IA | ZIP Code 50428-2037 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 92.50 | | Transaction ID: DECE5259C4BB240ADBB7 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 92.50 | |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 15904.37 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 57 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|---|-----------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC | Nature of Debt (Purpose): Fees |
| Mailing Address 1101 Penn Avenue | |
| City State ZIP Code Scranton PA 18509 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 136.05 | Transaction ID: DF477C3FE35E04A05B7F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 136.05 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Unitil | Nature of Debt (Purpose): Utilities |
| Mailing Address PO BOx 2013 | |
| City State ZIP Code Concord NH 03302 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 115.06 | Transaction ID: D14B3EB6706674783815 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 115.06 |

| | |
|---|-------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northern Business Machines | Nature of Debt (Purpose): Rental |
| Mailing Address 24 Terry Avenue | |
| City State ZIP Code Burlington MA 01803 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 698.00 | Transaction ID: DF72BE3ADBBB14CB9BC7 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 698.00 |

| | | |
|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 949.11 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|-------------------|--------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Grand Colony | | | Nature of Debt (Purpose): Lodging |
| Mailing Address 2824 Grand Avenue, #218 | | | |
| City Des Moines | State IA | ZIP Code 50312 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D232577C9B94046BB9A9 | |
| 153.50 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 153.50 | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank | | | Nature of Debt (Purpose): Loan interest payment |
| Mailing Address 185 Asylum Street | | | |
| City Hartford | State CT | ZIP Code 06103-3401 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D2455C9526EE244CC9BA | |
| 4177.74 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 4177.74 | |

| | | | |
|--|-------------|-------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | | | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 8110 | | | |
| City Aurora | State IL | ZIP Code 60572 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D51DCEF2884624EE6A6A | |
| 111.80 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 111.80 | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 4443.04 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 59 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PMI | Nature of Debt (Purpose): Parking |
| Mailing Address Parking Management, Inc. 1725 DeSales Street NW | |
| City State ZIP Code Washington DC 20036-4406 | |

| | |
|---|---|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="465.00"/> | Transaction ID: D8747457AA9894F1CB0C |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="465.00"/> | |

| | |
|--|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | Nature of Debt (Purpose): Shipping |
| Mailing Address PO Box 7247-0244 | |
| City State ZIP Code Philadelphia PA 19170 | |

| | |
|--|---|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="59.43"/> | Transaction ID: DBA9563936FE04325AD0 |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="59.43"/> | |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing | Nature of Debt (Purpose): Finance Charge |
| Mailing Address 1739 East Grand Avenue | |
| City State ZIP Code Des Moines IA 50316 | |

| | |
|---|---|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="110.59"/> | Transaction ID: D7499897E1ABB4EE2962 |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="110.59"/> | |

| | |
|--|--|
| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="635.02"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|-----------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northland Trumbull, LLC | Nature of Debt (Purpose): Rent |
| Mailing Address C/o Northland Investment Corporati P.O. Box 845604 | |
| City State ZIP Code Boston MA 02284 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 3850.00 | Transaction ID: D27B30042D3C24348857 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3850.00 |

| | |
|--|------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Heartland Flagpoles and Flags | Nature of Debt (Purpose): Flags |
| Mailing Address 3719 SW 9th Street | |
| City State ZIP Code Des Moines IA 50315 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 215.00 | Transaction ID: D92D91DF93AE6487B8F3 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 215.00 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank | Nature of Debt (Purpose): Loan Interest payment |
| Mailing Address 185 Asylum Street | |
| City State ZIP Code Hartford CT 06103-3401 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 7056.90 | Transaction ID: DA8EF061F679D4CBB9F4 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 7056.90 |

| | |
|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 11121.90 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------------|-------------------|--------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes | | | Nature of Debt (Purpose): Postage |
| Mailing Address PO Box 856390 | | | |
| City Louisville | State KY | ZIP Code 40285 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D87D4786A18704E3E866 | |
| 5522.57 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 5522.57 | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor IAFF FIREPAC | | | Nature of Debt (Purpose): Transportation Costs |
| Mailing Address Attn: David B. Billy 1750 New York Ave, NW | | | |
| City Washington | State DC | ZIP Code 20006-5305 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DE8437A16695047AC84E | |
| 32233.24 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 32233.24 | |

| | | | |
|---|-------------|-------------------|-----------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Kirkwood | | | Nature of Debt (Purpose): Rent |
| Mailing Address 400 Walnut Street | | | |
| City Des Moines | State IA | ZIP Code 50309 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DF06ED48AFB25453C90A | |
| 757.17 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 757.17 | |

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|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 38512.98 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|-----------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon Corporate Real Estate | Nature of Debt (Purpose): Rent |
| Mailing Address Mail Code FLG1-300 8800 Adamo Drive | |
| City State ZIP Code Tampa FL 33619 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 23250.00 | Transaction ID: D3856747E818749188BE | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 23250.00 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | Nature of Debt (Purpose): Courier Service |
| Mailing Address PO Box 7247-0244 | |
| City State ZIP Code Philadelphia PA 19170 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 86.50 | Transaction ID: D42C8F3A7325E4A5A80E | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 86.50 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedar Rapids Municipal Utilities | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3255 | |
| City State ZIP Code Cedar Rapids IA 52406 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 57.90 | Transaction ID: D0E366AACBEEB484CB02 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 57.90 |

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|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 23394.40 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|---|-------|----------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trumba Corporation | | | Nature of Debt (Purpose): Subscription |
| Mailing Address 1200 5th Ave. Suite 1700 | | | |
| City | State | ZIP Code | |
| Seattle | WA | 98101 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DF4C21A8864FF4D46B53 | |
| 1199.40 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 1199.40 | |

| | | | |
|---|-------|------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | | | Nature of Debt (Purpose): Legal Services |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | | | |
| City | State | ZIP Code | |
| Seattle | WA | 98101-3099 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D76E8E67033CC4385B66 | |
| 10000.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 10000.00 | |

| | | | |
|--|-------|----------|--------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | | | Nature of Debt (Purpose): Courier |
| Mailing Address PO Box 7247-0244 | | | |
| City | State | ZIP Code | |
| Philadelphia | PA | 19170 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: DD71C9A3EFA0F4512B37 | |
| 59.95 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 59.95 | |

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|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 11259.35 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 64 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|-----------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northland Trumbull, LLC | Nature of Debt (Purpose): Rent |
| Mailing Address C/o Northland Investment Corporati P.O. Box 845604 | |
| City State ZIP Code Boston MA 02284 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 3850.00 | Transaction ID: D62DA2D977A734EC594A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3850.00 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank | Nature of Debt (Purpose): Interest payment |
| Mailing Address 185 Asylum Street | |
| City State ZIP Code Hartford CT 06103-3401 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 5700.90 | Transaction ID: DDD808CCF6F3F461FA47 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 5700.90 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | Nature of Debt (Purpose): Telephone |
| Mailing Address P.O. Box 8110 | |
| City State ZIP Code Aurora IL 60572 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 623.00 | Transaction ID: D4FFB54806211448B923 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 623.00 |

| | |
|--|------------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ 10173.90 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|-----------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northland Trumbull, LLC | Nature of Debt (Purpose): Rent |
| Mailing Address C/o Northland Investment Corporati P.O. Box 845604 | |
| City State ZIP Code Boston MA 02284 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 3850.00 | Transaction ID: DA4696BC628A349F7971 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3850.00 |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedric Williams | Nature of Debt (Purpose): Car Repair |
| Mailing Address 4401 Aldrich Avenue S | |
| City State ZIP Code Minneapolis MN 55419-4821 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 280.43 | Transaction ID: D65530D3150B143C5BDD | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 280.43 |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedric Williams | Nature of Debt (Purpose): Car Rental |
| Mailing Address 4401 Aldrich Avenue S | |
| City State ZIP Code Minneapolis MN 55419-4821 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 748.02 | Transaction ID: DAC0405B098BA40BDB8F | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 748.02 |

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|--|----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 4878.45 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | |
|--|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedric Williams | | | Nature of Debt (Purpose): Car repair |
| Mailing Address 4401 Aldrich Avenue S | | | |
| City Minneapolis | State MN | ZIP Code 55419-4821 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 3197.74 | | Transaction ID: D80F5A221749E4D8CAFD | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3197.74 | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank | | | Nature of Debt (Purpose): Interest Payment |
| Mailing Address 185 Asylum Street | | | |
| City Hartford | State CT | ZIP Code 06103-3401 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1625.86 | | Transaction ID: D6D0173F2D16C488496D | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1625.86 | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voxel.net inc | | | Nature of Debt (Purpose): Web Hosting |
| Mailing Address 29 Broadway, 30th Floor | | | |
| City New York | State NY | ZIP Code 10006-3216 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 2459.50 | | Transaction ID: DC06AE5CA3EED49569AE | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2459.50 | |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 7283.10 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 67 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | | | | | | | |
|---|--|------------|----------|---------|----|------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | Nature of Debt (Purpose): Legal Services | | | | | | |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Seattle</td> <td>WA</td> <td>98101-3099</td> </tr> </table> | City | State | ZIP Code | Seattle | WA | 98101-3099 | |
| City | State | ZIP Code | | | | | |
| Seattle | WA | 98101-3099 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="10009.00"/> | Transaction ID: DF0B7FFEB54884D8496F | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="10009.00"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="10009.00"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="10009.00"/> | | | | | |

| | | | | | | | |
|---|--|----------|----------|------------|----|-------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing | Nature of Debt (Purpose): Finance Charge | | | | | | |
| Mailing Address 1739 East Grand Avenue | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50316</td> </tr> </table> | City | State | ZIP Code | Des Moines | IA | 50316 | |
| City | State | ZIP Code | | | | | |
| Des Moines | IA | 50316 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="111.89"/> | Transaction ID: DD996084ABB46436095F | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="111.89"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="111.89"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="111.89"/> | | | | | |

| | | | | | | | |
|---|---|----------|----------|----------|----|-------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Cleaver Company | Nature of Debt (Purpose): Food & Beverage | | | | | | |
| Mailing Address 75 Ninth Avenue | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10011</td> </tr> </table> | City | State | ZIP Code | New York | NY | 10011 | |
| City | State | ZIP Code | | | | | |
| New York | NY | 10011 | | | | | |

| | | | | | | | |
|--|--|--|---|--|--|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="378.20"/> | Transaction ID: D30F04EAEC434423A83D | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="378.20"/></td> </tr> </table> | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="378.20"/> | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | | | |
| <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="0.00"/> | <input style="width: 100%;" type="text" value="378.20"/> | | | | | |

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| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="10499.09"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 68 / 70
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Secured Shred | Nature of Debt (Purpose): Shredding |
| Mailing Address 624 Wilmont Ridge Road | |
| City State ZIP Code Westminster MD 21157-7318 | |

| | |
|---|---|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="120.00"/> | Transaction ID: D5880C9A067654615B51 |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| | Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="120.00"/> |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wired for Change, Inc. | Nature of Debt (Purpose): Internet Services |
| Mailing Address 1700 Connecticut Ave., NW Suite 403 | |
| City State ZIP Code Washington DC 20009 | |

| | |
|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="4000.00"/> | Transaction ID: DA09D2641F3154B62833 |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| | Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="4000.00"/> |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voxel.net inc | Nature of Debt (Purpose): Web Hosting |
| Mailing Address 29 Broadway, 30th Floor | |
| City State ZIP Code New York NY 10006-3216 | |

| | |
|--|--|
| Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="4919.00"/> | Transaction ID: DF06FD864428E4C118ED |
| Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/> | Payment This Period <input style="width: 100%;" type="text" value="0.00"/> |
| | Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="4919.00"/> |

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| 1) SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="9039.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input style="width: 100%;" type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input style="width: 100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width: 100%;" type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 69 / 70 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|---------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hertz | Nature of Debt (Purpose): |
| Mailing Address 333 W. Harbor Drive | |
| City State ZIP Code San Diego CA 92101 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 4111.17 | Transaction ID: DA142EB9576294B0793E | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4111.17 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Des Moines Embassy Club | Nature of Debt (Purpose): Food & Beverage |
| Mailing Address 801 Grand Avenue Suite 4000 | |
| City State ZIP Code Des Moines IA 50309-2762 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 4451.20 | Transaction ID: DDA7C5EA9B930420A98A | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4451.20 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor USRental.com | Nature of Debt (Purpose): Payment for computers |
| Mailing Address 970 Summer Street | |
| City State ZIP Code Stamford CT 06905-5542 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 4658.70 | Transaction ID: D1F57A4B00A37493E946 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4658.70 |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 13221.07 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | | |
|---|--------------------------------------|---|
| (Use separate schedule(s) for each numbered line) | PAGE 70 / 70 | |
| | FOR LINE NUMBER: (check only one) | <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12 |

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Metropolitan Club | Nature of Debt (Purpose): Food & Beverage |
| Mailing Address One East 60th Street | |
| City State ZIP Code New York NY 10022 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 21459.11 | Transaction ID: D633B2D0BC9E641C0B52 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 21459.11 |

| | |
|--|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing | Nature of Debt (Purpose): Printing |
| Mailing Address 1739 East Grand Avenue | |
| City State ZIP Code Des Moines IA 50316 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period 7562.83 | Transaction ID: D73B6D84253894C72B62 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 7562.83 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie | Nature of Debt (Purpose): Legal Services |
| Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor | |
| City State ZIP Code Seattle WA 98101-3099 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period 10017.02 | Transaction ID: D137E7211B1E44139A9C | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 10017.02 |

| | | |
|--|---|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 39038.96 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | 558333.52 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | 558333.52 |