

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 325
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Martin for Senate, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Marilyn K Fishbone

Mailing Address 15 Knollwood Dr

City State Zip Code  
New Haven CT 06515

FEC ID number of contributing federal political committee.

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

Transaction ID: C5025991

Amount of Each Receipt this Period

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
David E Fisher

Mailing Address 3 Dorado Drive

City State Zip Code  
Purchase NY 10577

FEC ID number of contributing federal political committee.

Name of Employer  
Bryan Cave LLP

Occupation  
Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2008

Transaction ID: C5029969

Amount of Each Receipt this Period

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Peter J Fitzpatrick

Mailing Address 401 East 88th St  
Apt 70

City State Zip Code  
New York NY 10128

FEC ID number of contributing federal political committee.

Name of Employer  
Arent Fox LLP

Occupation  
Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2008

Transaction ID: C5029869

Amount of Each Receipt this Period

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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