

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE AUG 28 PM 2:24 Office Use Only

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

12FE4M5

NEW HAMPSHIRE FOR SCOTT BROWN

ADDRESS (number and street) PO BOX 600

Check if different than previously reported. (ACC)

RYE NH 03870

2. FEC IDENTIFICATION NUMBER

C00560003

3. IS THIS REPORT NEW OR AMENDED CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on 09 / 09 / 2014 in the State of NH

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

07 / 01 / 2014 through 08 / 20 / 2014

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 Paul Kilgore

Signature of Treasurer Paul Kilgore

Date

08 / 28 / 2014

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

Table with 10 columns and 1 row, labeled 'Office Use Only' in the first column.

FEC FORM 3 (Revised 02/2003)

14020684153

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 485

Write or Type Committee Name

NEW HAMPSHIRE FOR SCOTT BROWN

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2014

To:

MM / DD / YYYY
08 / 20 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	935514.30	3324721.85
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	935514.30	3324721.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	1363543.33	2493399.69
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	51.92
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	1363543.33	2493347.77
8. Cash on Hand at Close of Reporting Period (from Line 27)...	1193309.74	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	

For further information contact:

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

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

14020684154

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 485

Write or Type Committee Name

NEW HAMPSHIRE FOR SCOTT BROWN

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2014

To:

MM / DD / YYYY
08 / 20 / 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)...

693202.00

2494283.50

(ii) Unitemized

173912.30

552438.35

(iii) TOTAL of contributions
from individuals .

867114.30

3046721.85

(b) Political Party Committees...

0.00

100.00

(c) Other Political Committees
(such as PACs) ...

68400.00

277900.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

935514.30

3324721.85

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES ..

127804.21

361935.66

13. LOANS:

(a) Made or Guaranteed by the
Candidate...

0.00

0.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

51.92

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)...

1063318.51

3686709.43

14020684155

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	1363543.33	2493399.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1363543.33	2493399.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	1493534.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1063318.51
25. SUBTOTAL (add Line 23 and Line 24)...	2556853.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	1363543.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	1193309.74

14020684156

**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 5 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. DANA CLAY ACKERLY

Mailing Address **29 CEDAR LANE WAY**

City **BOSTON** State **MA** Zip Code **02108-1213**

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

Name of Employer **MASS GENERAL HOSPITAL** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371936**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENT M. ADAMS

Mailing Address **4203 TENNYSON STREET**

City **HOUSTON** State **TX** Zip Code **77005-2751**

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

Name of Employer **LEWIS BRISBOIS BISGAARD & SMITH, LLP** Occupation **LAWYER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368790**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DENIS M. ALBANO

Mailing Address **29 NOVAK CIRCLE**

City **DRACUT** State **MA** Zip Code **01826-4113**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371782**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3850.00**

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

14020684157

**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 6 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STEVE ALBANO

Mailing Address **79 CHESTNUT HILL ROAD**

City **AMHERST** State **NH** Zip Code **03031-1504**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371755**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MATTHEW J. ALBUQUERQUE

Mailing Address **3 CHICKADEE COURT**

City **BEDFORD** State **NH** Zip Code **03110-4800**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371989**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JAMES ALLAN

Mailing Address **4 LORRAINE TERRACE**

City **MARBLEHEAD** State **MA** Zip Code **01945-1334**

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

Name of Employer **MASSACHUSETTS GENERAL HOSPITAL** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370655**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2250.00

14020684158

**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 7 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHARLES S. ALLEN

Mailing Address **156 WOODSTOCK AVENUE**

City KENILWORTH	State IL	Zip Code 60043-1235
---------------------------	--------------------	-------------------------------

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

Name of Employer SLOAN VALVE COMPANY	Occupation EXECUTIVE CHAIRMAN
--	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
08	08	2014

Transaction ID : **SA11.370994**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NATHAN ALLEN JR.

Mailing Address **7210 MARQUETTE STREET**

City DALLAS	State TX	Zip Code 75225-4626
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
07	30	2014

Transaction ID : **SA11.369445**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD ALLEN

Mailing Address **223 EGREMONT PLAIN RD
PMB 108**

City EGREMONT	State MA	Zip Code 01230-2284
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt

MM	DD	YYYY
08	19	2014

Transaction ID : **SA11.371551**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

1750.00

14020684159

**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 8 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. SUSAN ALTAMORE CARUSI		Date of Receipt MM / DD / YYYY 08 / 16 / 2014	
Mailing Address P.O. BOX 203		Transaction ID : SA11.371468	
City MILL NECK	State NY	Zip Code 11765-0203	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. ROBERT ALTER		Date of Receipt MM / DD / YYYY 07 / 24 / 2014	
Mailing Address 3334 E. COAST HWY., STE 410		Transaction ID : SA11.368760	
City CORONA DEL MAR	State CA	Zip Code 92625-2328	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer SEAVIEW INVESTORS, LLC	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. MR. ANTHONY E. AMANTI		Date of Receipt MM / DD / YYYY 08 / 04 / 2014	
Mailing Address 42 MAGNOLIA TERRACE		Transaction ID : SA11.370282	
City WESTFIELD	State MA	Zip Code 01085-4662	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	

14020684160

**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 9 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID L. AMMEN

Mailing Address **412 MAIN STREET**

City **GROTON** State **MA** Zip Code **01450-1232**

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

Name of Employer **I.N.S.C.O. CORPORATION** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368508**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. AMMEN

Mailing Address **412 MAIN STREET**

City **GROTON** State **MA** Zip Code **01450-1232**

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

Name of Employer **I.N.S.C.O. CORPORATION** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370540**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID L. AMMEN

Mailing Address **412 MAIN STREET**

City **GROTON** State **MA** Zip Code **01450-1232**

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

Name of Employer **I.N.S.C.O. CORPORATION** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371706**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

300.00

14020684161

**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 10 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
CAROL ANDERSON

Mailing Address 1025 STRONG RD

City State Zip Code
VICTOR NY 14564-9124

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
07 / 08 / 2014

Transaction ID : SA11.367754

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CAROL K. ANG

Mailing Address 31440 N. REIGATE LANE

City State Zip Code
LIBERTYVILLE IL 60048-4852

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SA11.370015

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. VINCE AQUINO

Mailing Address 7 HAZEL AVENUE

City State Zip Code
NASHUA NH 03062-1448

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

Name of Employer Occupation
NETAPP SALES MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SA11.371671

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

600.00

14020684162

**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 11 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. RUTH E. ARMKNECHT

Mailing Address **100 KEYES ROAD**
APARTMENT 110

City **CONCORD** State **MA** Zip Code **01742-1652**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370267**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. ARMOUR

Mailing Address **34 WOODLAND ROAD**

City **NORWOOD** State **MA** Zip Code **02062-4756**

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

Name of Employer **Y.C.N. TRANSPORTATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368516**

Amount of Each Receipt this Period
1850.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. ARMOUR

Mailing Address **34 WOODLAND ROAD**

City **NORWOOD** State **MA** Zip Code **02062-4756**

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

Name of Employer **Y.C.N. TRANSPORTATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt **08 / 19 / 2014**

Transaction ID : **SA11.368516B**

Amount of Each Receipt this Period
-750.00
CONTRIBUTION
**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

1950.00

14020684163

**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 12 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. ARMOUR

Mailing Address **34 WOODLAND ROAD**

City **NORWOOD** State **MA** Zip Code **02062-4756**

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

Name of Employer **Y.C.N. TRANSPORTATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373570**

Amount of Each Receipt this Period
750.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
E DIANNE ARNHEIM

Mailing Address **114 LINDEN ST**

City **EXETER** State **NH** Zip Code **03833-4107**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.369276**

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. ARTHUR JR.

Mailing Address **129 RIVERMEAD ROAD**

City **PETERBOROUGH** State **NH** Zip Code **03458-1731**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368971**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **350.00**

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

14020684164

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 485
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. EDWARD K. ASPLUNDH

Mailing Address **230 EL PUEBLO WAY**

City **PALM BEACH** State **FL** Zip Code **33480-3218**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370605**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. FLORA CAMERON ATHERTON CRICHTON

Mailing Address **315 WESTOVER ROAD**

City **ALAMO HEIGHTS** State **TX** Zip Code **78209-5653**

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

Name of Employer **HSWP** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368574**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. LLOYD AXELROD

Mailing Address **48 PARK AVENUE**

City **WELLESLEY** State **MA** Zip Code **02481-6711**

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

Name of Employer **MASS GENERAL PHYSICIANS ORGANIZATION** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371175**

Amount of Each Receipt this Period
50.00

CONTRIBUTION

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

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

1550.00

14020684165

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 14 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. JEAN A. BAGLEY

Mailing Address **5 STEPHENS COURT**

City **TROPHY CLUB** State **TX** Zip Code **76262-5421**

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

Name of Employer **LAM RESEARCH, INC.** Occupation **CHAIRMAN OF BOARD**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371348**

Amount of Each Receipt this Period
400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LISA E. BAILEY

Mailing Address **234 PARKER ROAD**

City **GOFFSTOWN** State **NH** Zip Code **03045-2005**

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

Name of Employer **CONTINENTAL PAVING** Occupation **ACCOUNTING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370240**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH J. BALDARELLI

Mailing Address **22 BEAN ROAD**

City **STERLING** State **MA** Zip Code **01564-2405**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.369970**

Amount of Each Receipt this Period
370.00
 CONTRIBUTION

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

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

1270.00

14020684166

**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 15 OF 485	
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH J. BALDARELLI

Mailing Address **22 BEAN ROAD**

City STERLING	State MA	Zip Code 01564-2405
-------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.372073**

Amount of Each Receipt this Period
130.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD C. BANE

Mailing Address **118 HUNTINGTON AVE. APT. 401**

City BOSTON	State MA	Zip Code 02116-5761
-----------------------	--------------------	-------------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371988**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HANCOCK BANNING III

Mailing Address **3 PURSUIT
APARTMENT 7A**

City ALISO VIEJO	State CA	Zip Code 92656-4213
----------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371418**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

1130.00

14020684167

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 485
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH T. BARNETT

Mailing Address P.O. BOX 193

City State Zip Code
PALOS VERDES ESTATES CA 90274-0193

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

Name of Employer Occupation
SELF-EMPLOYED REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370395**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CYNTHIA BARRETTE

Mailing Address P.O. BOX 5254

City State Zip Code
HANOVER NH 03755-5254

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.373689B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MS. CYNTHIA BARRETTE

Mailing Address P.O. BOX 5254

City State Zip Code
HANOVER NH 03755-5254

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.373694**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

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

500.00

14020684168

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

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

FOR LINE NUMBER: PAGE 17 OF 485

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID A. BARRETT

Mailing Address **68 PLEASANT STREET**
P.O. BOX 418

City **MARION** State **MA** Zip Code **02738-1643**

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

Name of Employer **BALDWIN BROTHERS, INC.** Occupation **INVESTMENT ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371956**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAY BARRETTE

Mailing Address **P.O. BOX 5254**

City **HANOVER** State **NH** Zip Code **03755-5254**

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

Name of Employer **WHITE MOUNTAINS INSURANCE GROUP** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371845**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

SEE REATTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CYNTHIA BARRETTE

Mailing Address **P.O. BOX 5254**

City **HANOVER** State **NH** Zip Code **03755-5254**

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

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.373689**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

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

5450.00

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

14020684169

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 18 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RAY BARRETTE

Mailing Address P.O. BOX 5254

City: **HANOVER** State: **NH** Zip Code: **03755-5254**

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

Name of Employer: **WHITE MOUNTAINS INSURANCE GROUP** Occupation: **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200.00**

Date of Receipt: **08 / 20 / 2014**

Transaction ID : **SA11.371845B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
MR. RAY BARRETTE

Mailing Address P.O. BOX 5254

City: **HANOVER** State: **NH** Zip Code: **03755-5254**

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

Name of Employer: **WHITE MOUNTAINS INSURANCE GROUP** Occupation: **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200.00**

Date of Receipt: **08 / 20 / 2014**

Transaction ID : **SA11.373690B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. RAY BARRETTE

Mailing Address P.O. BOX 5254

City: **HANOVER** State: **NH** Zip Code: **03755-5254**

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

Name of Employer: **WHITE MOUNTAINS INSURANCE GROUP** Occupation: **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200.00**

Date of Receipt: **08 / 20 / 2014**

Transaction ID : **SA11.373692**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

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

0.00

14020684170

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 19 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. PAMELA T. BARTLETT

Mailing Address **156 GREELEY STREET**

City **HUDSON** State **NH** Zip Code **03051-3422**

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

Name of Employer **BARLO SIGNS** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369207**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES M. BARTON III

Mailing Address **46 BENJAMIN STREET**

City **MANCHESTER** State **NH** Zip Code **03109-4317**

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

Name of Employer **THE ALBANO GROUP** Occupation **TAX CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371815**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES F. BASS

Mailing Address **ORCHARD HILL FARM**

City **PETERBOROUGH** State **NH** Zip Code **03458-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369518**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1500.00

14020684171

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

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

FOR LINE NUMBER: PAGE 20 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. MARGARET E. BASS

Mailing Address **5R FERNWOOD DRIVE**

City **WESTFORD** State **MA** Zip Code **01886-1137**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369954**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROSALY SWANN BASS

Mailing Address **P.O. BOX 210**

City **PETERBOROUGH** State **NH** Zip Code **03458-0210**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369519**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JUDITH A. BATTIT

Mailing Address **34 WOODBINE ROAD**

City **BELMONT** State **MA** Zip Code **02478-1601**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369979**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

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

650.00

14020684172

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 21 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CARL T. BAUER

Mailing Address **610 HIGH HAMPTON ROAD**

City **SAINT LOUIS** State **MO** Zip Code **63124-1016**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369740**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN BEAKLEY

Mailing Address **533 WEST STREET**

City **CARLISLE** State **MA** Zip Code **01741-1441**

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

Name of Employer **CISCO SYSTEMS** Occupation **SOFTWARE DEVELOPMENT MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
07 / 15 / 2014

Transaction ID : **SA11.368425**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. BEATSON JR.

Mailing Address **P.O. BOX 6570**

City **ANNAPOLIS** State **MD** Zip Code **21401-0570**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369535**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1000.00

1000.00

14020684173

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

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

FOR LINE NUMBER: PAGE 22 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. BEAUREGARD

Mailing Address **57 WASHINGTON STREET**

City **KEENE** State **NH** Zip Code **03431-3107**

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

Name of Employer **COLONIAL RENTAL MANAGEMENT** Occupation **REAL ESTATE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.372045**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ELEANOR H. BECKER

Mailing Address **10 LONGWOOD DRIVE
APARTMENT 448**

City **WESTWOOD** State **MA** Zip Code **02090-1182**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371243**

Amount of Each Receipt this Period
450.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELSIE K. BEEKLEY

Mailing Address **574 PONTIUS ROAD**

City **CINCINNATI** State **OH** Zip Code **45233-4532**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369766**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

950.00

14020684174

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DRAKE G. BEHRAKIS

Mailing Address **80 HAYDEN AVENUE**
SUITE 100

City **LEXINGTON** State **MA** Zip Code **02421-7962**

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

Name of Employer **MARWICK ASSOCIATES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371484**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KATIE BELAVITCH

Mailing Address **354 LINCOLN AVE.**

City **PORTSMOUTH** State **NH** Zip Code **03801-5120**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371980**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH BELLAVANCE

Mailing Address **61 BERKELEY STREET**

City **NASHUA** State **NH** Zip Code **03064-1938**

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

Name of Employer **BELLAVANCE BEV. COMPANY, INC.** Occupation **MALT BEVERAGE DIST.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371931**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

3600.00

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

3600.00

14020684175

**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 24 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ALAN BEMBENEK

Mailing Address **300 MUSTERFIELD RD**

City **CONCORD** State **MA** Zip Code **01742-1613**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **PORTFOLIO MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 20 / 2014

Transaction ID : **SA11.368632**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN BENNETT

Mailing Address **111 COLLEGE ROAD**

City **CENTER HARBOR** State **NH** Zip Code **03226-3304**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369862**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT M. BEREN

Mailing Address **13840 LE MANS WAY**

City **PALM BEACH GARDENS** State **FL** Zip Code **33410-1266**

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

Name of Employer **BEREXCO, L.L.C.** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368811**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1750.00

14020684176

**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 25 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
HAROLD BEZOS

Mailing Address 19130 FOX LANDING

City BOCA RATON State FL Zip Code 33434-5156

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

Name of Employer OWNER: BEZTAK COMPANIES Occupation REAL ESTATE DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt MM / DD / YYYY
07 / 18 / 2014

Transaction ID : SA11.368618

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. COREY M. BIALOW

Mailing Address 73 STONECREST DRIVE

City NEEDHAM State MA Zip Code 02492-2785

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

Name of Employer BIALOW REAL ESTATE Occupation C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt MM / DD / YYYY
07 / 18 / 2014

Transaction ID : SA11.368617

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA BIGGIE

Mailing Address 418 OSGOOD RD

City MILFORD State NH Zip Code 03055-3461

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SA11.371753

Amount of Each Receipt this Period
200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 2200.00

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

14020684177

**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 26 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT BIOLCHINI

Mailing Address **1744 E. 29TH STREET**

City **TULSA** State **OK** Zip Code **74114-5402**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368949**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES T. BIRCHALL

Mailing Address **44 CHARLES JOHNSON ROAD**

City **SOUTHWICK** State **MA** Zip Code **01077-9728**

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

Name of Employer **ARWAR FIRE TECHNOLOGIES** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370689**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERRY BIRD

Mailing Address **195 HURRICANE HILL ROAD**

City **MASON** State **NH** Zip Code **03048-3903**

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

Name of Employer **GAMMA MEDICAL** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
07 / 15 / 2014

Transaction ID : **SA11.368417**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

900.00

14020684178

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

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

FOR LINE NUMBER: PAGE 27 OF 485

(check only one)

<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)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

JERRY BIRD

A.

Mailing Address 195 HURRICANE HILL ROAD

City MASON State NH Zip Code 03048-3903

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

Name of Employer Occupation
GAMMA MEDICAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SA11.368418

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JERRY BIRD

B.

Mailing Address 195 HURRICANE HILL ROAD

City MASON State NH Zip Code 03048-3903

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

Name of Employer Occupation
GAMMA MEDICAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SA11.368419

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN BITZER JR.

C.

Mailing Address 411 W. 7TH STREET
APARTMENT 507

City FORT WORTH State TX Zip Code 76102-3607

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SA11.369783

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

1000.00

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

14020684179

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

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

FOR LINE NUMBER: PAGE 28 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. J. DUNCAN BLACK

Mailing Address **10 ROSE LANE**

City **BEDFORD** State **NH** Zip Code **03110-5808**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371787**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JUDITH E. BLINN

Mailing Address **67 BLOSSOM ROAD**

City **WINDHAM** State **NH** Zip Code **03087-1536**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371773**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOYCE A. BOESCH

Mailing Address **4515 W STREET NW**

City **WASHINGTON** State **DC** Zip Code **20007-1513**

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

Name of Employer **SELF-EMPLOYED** Occupation **GOVT RELATIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2014

Transaction ID : **SA11.368346**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

1000.00
1000.00

14020684180

**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 29 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ALLEN D. BOGER JR.

Mailing Address **404 LOMAX COVE**

City **AUSTIN** State **TX** Zip Code **78732-2482**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368816**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
J. C. BOGGS

Mailing Address **3111 GARFIELD STREET NW**

City **WASHINGTON** State **DC** Zip Code **20008-3538**

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

Name of Employer **KING & SPALDING** Occupation **LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : **SA11.371031**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RICHARD A. BOLDUC

Mailing Address **P.O. BOX 169**

City **PLAINFIELD** State **NH** Zip Code **03781-0169**

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

Name of Employer **AUBRUN FAMILY DENTISTRY** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : **SA11.369241**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1750.00

14020684181

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

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

FOR LINE NUMBER: PAGE 30 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROLANDO E. BONACHEA

Mailing Address **37 BARRINGTON DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-5601**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369838**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. A. RICHARD BONANNO

Mailing Address **255 MERRIMACK STREET**

City **METHUEN** State **MA** Zip Code **01844-6433**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370215**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP BONANNO

Mailing Address **50 SHAKER LANE**

City **EAST FALMOUTH** State **MA** Zip Code **02536-7047**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369857**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

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

1200.00

14020684182

**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 31 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
KAREN BOODAKIAN

Mailing Address **29 ALLEN ROAD**

City **WINCHESTER** State **MA** Zip Code **01890-4001**

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

Name of Employer **TOWN OF LEXINGTON** Occupation **SECRETARY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SA11.368752**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVE BOODAKIAN

Mailing Address **29 ALLEN ROAD**

City **WINCHESTER** State **MA** Zip Code **01890-4001**

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

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SA11.368754**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. HOWARD A. BOOKMAN

Mailing Address **8 KING PHILLIP DRIVE**

City **LONDONDERRY** State **NH** Zip Code **03053-2822**

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

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369260**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

750.00

14020684183

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 32 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
RICHARD BOTNICK

Mailing Address **150 SPRUCE LANE**

City **AUBURN** State **NH** Zip Code **03032-3417**

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

Name of Employer **E AND R CLEANERS** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 29 / 2014

Transaction ID : **SA11.369294**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN T. BOTTOMLEY

Mailing Address **P.O. BOX 461**

City **RYE BEACH** State **NH** Zip Code **03871-0461**

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

Name of Employer **THE FULLER FOUNDATIONS** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370844**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PAULETTE M. BOURGEOIS

Mailing Address **520 EDGE WATER DRIVE**

City **GILFORD** State **NH** Zip Code **03249-6681**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368796**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1250.00

14020684184

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

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

FOR LINE NUMBER: PAGE 33 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT H. BOURGEOIS

Mailing Address **520 EDGE WATER DRIVE**

City **GILFORD** State **NH** Zip Code **03249-6681**

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

Name of Employer **M.B. TRACTOR & EQUIPMENT** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368798**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNETH BOWDON

Mailing Address **3406 HIGHLAND MEADOW DR**

City **FARMERS BRANCH** State **TX** Zip Code **75234-2256**

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

Name of Employer **PANGEA'S EDGE HOLDINGS, LP** Occupation **GEOLOGIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : **SA11.369369**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS M. BOYD

Mailing Address **2025 SCROGGINS ROAD**

City **ALEXANDRIA** State **VA** Zip Code **22302-3122**

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

Name of Employer **DLA PIPER LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371519**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

1250.00

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

14020684185

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 34 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL B. BRACY

Mailing Address **29555 PORPOISE CREEK ROAD**

City **TRAPPE** State **MD** Zip Code **21673-1716**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 10 / 2014

Transaction ID : **SA11.371088**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOEL C. BRADLEY

Mailing Address **141 MAGAZINE STREET**

City **CAMBRIDGE** State **MA** Zip Code **02139-4740**

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

Name of Employer **C.I.L., INC.** Occupation **CHEMIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369735**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JULIE BRADLEY

Mailing Address **7 MELLEEN LANE**

City **WAYLAND** State **MA** Zip Code **01778-2006**

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

Name of Employer **TRIPADVISOR** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 13 / 2014

Transaction ID : **SA11.368350**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

4600.00

14020684186

**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 35 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. SUSAN C. BRADLEY

Mailing Address **109 SHORE ROAD**

City **GILFORD** State **NH** Zip Code **03249-6315**

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

Name of Employer **SELF-EMPLOYED** Occupation **REALTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368794**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIM BRADY

Mailing Address **670 N. COMMERCIAL STREET
SUITE 3030**

City **MANCHESTER** State **NH** Zip Code **03101-1160**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.370118**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**

C. Full Name (Last, First, Middle Initial)
SHANE D. BRADY

Mailing Address **670 N. COMMERCIAL STREET
SUITE 3030**

City **MANCHESTER** State **NH** Zip Code **03101-1160**

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

Name of Employer **BRADY SULLIVAN PROPERTIES** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4070.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.370119**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION TO SPOUSE**

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

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

1000.00

1000.00

14020684187

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

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

FOR LINE NUMBER: PAGE 36 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
SHANE D. BRADY

Mailing Address **670 N. COMMERCIAL STREET**
SUITE 3030

City **MANCHESTER** State **NH** Zip Code **03101-1160**

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

Name of Employer **BRADY SULLIVAN PROPERTIES** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4070.00

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.370119B**

Amount of Each Receipt this Period
-1470.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
SHANE D. BRADY

Mailing Address **670 N. COMMERCIAL STREET**
SUITE 3030

City **MANCHESTER** State **NH** Zip Code **03101-1160**

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

Name of Employer **BRADY SULLIVAN PROPERTIES** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4070.00

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.370121**

Amount of Each Receipt this Period
1470.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. HENRY E. BRATCHER III

Mailing Address **55 BACON STREET**

City **NATICK** State **MA** Zip Code **01760-2901**

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

Name of Employer **ZURICH** Occupation **LEGAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371851**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

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

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

25.00

14020684188

**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 37 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 14	<input type="checkbox"/> 11f 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN R. BREMER

Mailing Address **201 SEABREEZE COURT**

City **VERO BEACH** State **FL** Zip Code **32963-9508**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370598**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MURRAY BRESKY

Mailing Address **5190 MAIN STREET**

City **SOUTH FALLSBURG** State **NY** Zip Code **12779-**

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

Name of Employer **MURRAY'S CHICKEN** Occupation **POULTRY PROCESSOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **276.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369337**

Amount of Each Receipt this Period
180.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MURRAY BRESKY

Mailing Address **5190 MAIN STREET**

City **SOUTH FALLSBURG** State **NY** Zip Code **12779-**

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

Name of Employer **MURRAY'S CHICKEN** Occupation **POULTRY PROCESSOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **276.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.371508**

Amount of Each Receipt this Period
96.00
CONTRIBUTION

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

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

1276.00

1276.00

14020684189

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 38 OF 485
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	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BRIAN BRISEBOIS

Mailing Address **8 CHERRY HOLLOW ROAD**

City **NASHUA** State **NH** Zip Code **03062-2233**

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

Name of Employer **MERRIMACK MORTGAGE COMPANY, INC.** Occupation **BRANCH MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371203**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MANDY BRISEBOIS

Mailing Address **8 CHERRY HOLLOW ROAD**

City **NASHUA** State **NH** Zip Code **03062-2233**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371198**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES P. BROOKS

Mailing Address **4320 NE 261ST AVENUE**

City **CAMAS** State **WA** Zip Code **98607-7013**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371634**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1000.00

14020684190

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 39 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT BROOKER JR.

Mailing Address 175 SCHOOL STREET

City: MANCHESTER State: MA Zip Code: 01944-1236

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 08 / 2014

Transaction ID : SA11.370981

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THEODORE T. BROOKS JR.

Mailing Address 184 DEERFIELD ROAD

City: NOTTINGHAM State: NH Zip Code: 03290-4952

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

Name of Employer: INFORMATION REQUESTED PER BEST EFF(Occupation: INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 18 / 2014

Transaction ID : SA11.371769

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID BROWN

Mailing Address 379, MAIN STREET

City: WINCHESTER State: MA Zip Code: 01890-2923

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

Name of Employer: INFORMATION REQUESTED PER BEST EFF(Occupation: INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 08 / 07 / 2014

Transaction ID : SA11.370495

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

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

3000.00

14020684191

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

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

FOR LINE NUMBER: PAGE 40 OF 485

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
EDWARD BROWN

Mailing Address **3 WEDGEWOOD LANE**

City **VOORHEESVILLE** State **NY** Zip Code **12186-9768**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369358**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REGINALD BROWN

Mailing Address **317 MANSION DRIVE**

City **ALEXANDRIA** State **VA** Zip Code **22302-2904**

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

Name of Employer **WILMERHALE** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368681**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SUSAN V. BRUNOFF

Mailing Address **334 W. CEDAR STREET**

City **NEW HOLLAND** State **PA** Zip Code **17557-1202**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368514**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

1150.00

14020684192

**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 41 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. SUSAN V. BRUNOFF

Mailing Address **334 W. CEDAR STREET**

City **NEW HOLLAND** State **PA** Zip Code **17557-1202**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370268**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ELIZABETH BRYDEN

Mailing Address **1 W. 67TH STREET
APARTMENT 611**

City **NEW YORK** State **NY** Zip Code **10023-6200**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **547.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370604**

Amount of Each Receipt this Period
205.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARRY J. BUCKEL

Mailing Address **211 WOODBINE AVENUE**

City **NORTHPORT** State **NY** Zip Code **11768-2818**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 09 / 2014

Transaction ID : **SA11.371081**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

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

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

455.00

14020684193

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. TIMOTHY A. BURR

Mailing Address **42 HUNTINGTON ROAD**

City **NEWTON** State **MA** Zip Code **02458-2417**

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

Name of Employer **INTEX SOLUTIONS** Occupation **BOND ANALYST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370742**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BILL BUTLER

Mailing Address **10706 BEAVER DAM ROAD**

City **HUNT VALLEY** State **MD** Zip Code **21030-2207**

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

Name of Employer **SINCLAIR BROADCAST GROUP** Occupation **MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369349**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN E. BUTLER

Mailing Address **2000 S. GRANDVIEW AVENUE**

City **DUBUQUE** State **IA** Zip Code **52003-7923**

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

Name of Employer **COTTINGHAM BUTLER** Occupation **EXECUTIVE CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371217**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1000.00

14020684194

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

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

FOR LINE NUMBER: PAGE 43 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. DEBORAH A. BYRON

Mailing Address **405 FRANKLIN ST**

City **WRENTHAM** State **MA** Zip Code **02093-1237**

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

Name of Employer **SELF-EMPLOYED** Occupation **PSYCHOTHERAPIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 01 / 2014

Transaction ID : **SA11.367200**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY R. CABANA

Mailing Address **3 CORTLAND DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-4225**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371778**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD L. CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

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

Name of Employer **H.L.M. VENTURE PARTNERS** Occupation **VENTURE PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371948**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

2950.00

14020684195

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 OF 485
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. EDWARD L. CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

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

Name of Employer **H.L.M. VENTURE PARTNERS** Occupation **VENTURE PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371948B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. EDWARD L. CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

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

Name of Employer **H.L.M. VENTURE PARTNERS** Occupation **VENTURE PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.373702**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. EDWARD L. CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

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

Name of Employer **H.L.M. VENTURE PARTNERS** Occupation **VENTURE PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.373477**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

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

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

2600.00

14020684196

**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 45 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
SARAH CALHOUN

Mailing Address **740 STALLSWORTH ROAD**

City **MCDONOUGH** State **GA** Zip Code **30252-6136**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369352**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DENNIS A. CALVANESE

Mailing Address **5555 HERON POINT DRIVE**

City **NAPLES** State **FL** Zip Code **34108-2708**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370427**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD M. CAMERON

Mailing Address **P.O. BOX 21440**

City **LITTLE ROCK** State **AR** Zip Code **72221-1440**

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

Name of Employer **MOUNTAIRE CORP** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368252**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

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

3800.00

14020684197

**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 46 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. CAMMARANO

Mailing Address **250 S. OCEAN BLVD APT 12B**

City **BOCA RATON** State **FL** Zip Code **33432-6257**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371566**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY CAMPBELL

Mailing Address **4 PENCOOK PLACE**

City **ANDOVER** State **MA** Zip Code **01810-4737**

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

Name of Employer **GILBERT CAMPBELL REAL ESTATE** Occupation **BUSSINES EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371932**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARRISON CAMPBELL

Mailing Address **3906 N. GLEBE RD.**

City **ARLINGTON** State **VA** Zip Code **22207-4340**

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

Name of Employer **SELF-EMPLOYED** Occupation **LIFE INSURANCE AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : **SA11.369481**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3700.00**

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

14020684198

**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)

11a 11b 11c 11d

12 13a 13b 14 15

PAGE 47 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL E. CAPRARIO JR.

Mailing Address **27 SPARTAN DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-4229**

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

Name of Employer **SELF-EMPLOYED** Occupation **MANAGEMENT CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.369036**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ADAM CARACE

Mailing Address **1 WOODLAND DRIVE**

City **SANDOWN** State **NH** Zip Code **03873-2320**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370233**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW CARACE

Mailing Address **54 HUNT ROAD**

City **KINGSTON** State **NH** Zip Code **03848-3456**

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

Name of Employer **PEST END EXTERMINATORS** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370238**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

1500.00

14020684199

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. A. BRADFORD CARD

Mailing Address **896 HELGA PLACE**

City **MCLEAN** State **VA** Zip Code **22102-2164**

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

Name of Employer **DUTKO WORLDWIDE** Occupation **MANAGING PRINCIPAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368215**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. C. WILLIAM CARET

Mailing Address **986 SEA VIEW AVENUE**

City **OSTERVILLE** State **MA** Zip Code **02655-2434**

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

Name of Employer **CAREY REALTY LLC** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368468**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DALE L. CARLETON

Mailing Address **84 ARBUTUS TRAIL**

City **CHATHAM** State **MA** Zip Code **02633-1143**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 15 / 2014

Transaction ID : **SA11.368424**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1500.00

14020684200

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 485

(check only one)

<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
REBECCA CARLIN

Mailing Address **507 N CENTER ST**

City **EBENSBURG** State **PA** Zip Code **15931-1120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2014

Transaction ID : **SA11.367848**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD CARLSTON

Mailing Address **654 BROOKE ROAD**

City **WAYNE** State **PA** Zip Code **19087-4707**

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

Name of Employer **BULLOCK EQUITIES CO.** Occupation **FINANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
08 / 13 / 2014

Transaction ID : **SA11.371127**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERALD J. CARROLL

Mailing Address **18 PENACOOK LANE**

City **NATICK** State **MA** Zip Code **01760-3663**

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

Name of Employer **COMMONWEALTH MANAGEMENT GROUP** Occupation **PROPERTY MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2014

Transaction ID : **SA11.367682**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

400.00

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

14020684201

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 50 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
PRISCILLA CARSON

Mailing Address **60 LINCOLN DR.**

City **NEW BOSTON** State **NH** Zip Code **03070-4300**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 MM / DD / YYYY
07 / 22 / 2014

Transaction ID : **SA11.368648**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRISCILLA CARSON

Mailing Address **60 LINCOLN DR.**

City **NEW BOSTON** State **NH** Zip Code **03070-4300**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 MM / DD / YYYY
07 / 27 / 2014

Transaction ID : **SA11.369150**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TOD CARSON

Mailing Address **1260 N. WETHERLY DRIVE**

City **LOS ANGELES** State **CA** Zip Code **90069-1816**

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

Name of Employer **SELF-EMPLOYED** Occupation **MERCHANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368337**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

250.00

14020684202

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 OF 485

(check only one)

<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
BRUCE CARUSI

Mailing Address **P.O. BOX 203**

City **MILL NECK** State **NY** Zip Code **11765-0203**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
08 / 16 / 2014

Transaction ID : **SA11.371469**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PETER T. CASE

Mailing Address **2 BURTON LANE**

City **KINGSTON** State **MA** Zip Code **02364-1414**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369992**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN H. CATLIN

Mailing Address **222 BURNS HILL ROAD**

City **WILTON** State **NH** Zip Code **03086-5107**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369520**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

3350.00

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

3350.00

14020684203

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. GERALD D. CAVANAUGH

Mailing Address **7850 EL SENDERO LOT 10**

City **SCOTTSDALE** State **AZ** Zip Code **85266-1217**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369531**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. GERALD D. CAVANAUGH

Mailing Address **7850 EL SENDERO LOT 10**

City **SCOTTSDALE** State **AZ** Zip Code **85266-1217**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371974**

Amount of Each Receipt this Period
75.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER M. CHALONER

Mailing Address **307 AMHERST STREET UNIT 3**

City **NASHUA** State **NH** Zip Code **03063-1747**

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

Name of Employer **CITY SIDE MANAGEMENT CORPORATION** Occupation **CONTROLLER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371813**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

425.00

14020684204

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

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

FOR LINE NUMBER: PAGE 53 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT W. CHAMBERLIN

Mailing Address **4951 ROCKWOOD PARKWAY NW**

City **WASHINGTON** State **DC** Zip Code **20016-3247**

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

Name of Employer **MCBEE STRATEGIC** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369321**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NORMAN B. CHAMP III

Mailing Address **829 PARK AVENUE, APT. 5B**

City **NEW YORK** State **NY** Zip Code **10021-2839**

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

Name of Employer **U.S. SECURITIES & EXCHANGE COMMISSIO** Occupation **DIVISION DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.369951**

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELLEN CHATTER

Mailing Address **2324 WILLOW DROP WAY**

City **OVIEDO** State **FL** Zip Code **32766-7082**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369738**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

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

3750.00

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

3750.00

14020684205

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

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

FOR LINE NUMBER: PAGE 54 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. NIRMAL CHATTERJEE

Mailing Address **2324 WILLOW DROP WAY**

City **OVIEDO** State **FL** Zip Code **32766-7082**

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

Name of Employer **AIR PRODUCTS & CHEMICALS** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11.369704

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELEANOR R. CHECKLEY

Mailing Address **14 BUCKSKIN PATH**

City **PLYMOUTH** State **MA** Zip Code **02360-1837**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11.369953

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELEANOR R. CHECKLEY

Mailing Address **14 BUCKSKIN PATH**

City **PLYMOUTH** State **MA** Zip Code **02360-1837**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11.372061

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

2800.00

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

14020684206

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

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

FOR LINE NUMBER: PAGE 55 OF 485

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ROWENA CHERRY

Mailing Address **5362 WOODLANDS ESTS DR SOUTH**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48302-2875**

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

Name of Employer **SELF-EMPLOYED** Occupation **AUTHOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371858**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NICHOLAS CHICKERING

Mailing Address **P.O. BOX 455**

City **WHITEFISH** State **MT** Zip Code **59937-0455**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : **SA11.369399**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY J. CIBOROWSKI

Mailing Address **P.O. BOX 443**

City **CONCORD** State **NH** Zip Code **03302-0443**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : **SA11.370516**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1400.00

14020684207

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

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

FOR LINE NUMBER: PAGE 56 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HENRY J. CIBOROWSKI

Mailing Address **P.O. BOX 443**

City **CONCORD** State **NH** Zip Code **03302-0443**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371630**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN P. CLANCY

Mailing Address **11 TANGLEWOOD DRIVE**

City **CHELMSFORD** State **MA** Zip Code **01824-1262**

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

Name of Employer **ENTERPRISE BANK** Occupation **BANKING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371299**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JASON CLARK

Mailing Address **P.O. BOX 1143**

City **RYE** State **NH** Zip Code **03870-1143**

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

Name of Employer **THE BAUPOST GROUP** Occupation **DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371494**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1350.00

14020684208

**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)

11a 11b 11c 11d 12 13a 13b 14 15

PAGE 57 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD W. CLARKE

Mailing Address **32 SALISBURY ROAD**

City **KEENE** State **NH** Zip Code **03431-2887**

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

Name of Employer **CLARKE DISTRIBUTORS, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369506**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SALLY A. CLARK

Mailing Address **511 S. POST OAK LANE**

City **HOUSTON** State **TX** Zip Code **77056-1451**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369681**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS C. CLAY

Mailing Address **45 SNOW LANE**

City **NEW LONDON** State **NH** Zip Code **03257-5475**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370359**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

4100.00

14020684209

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

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

FOR LINE NUMBER: PAGE 58 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ALEC F. CLERIHEW

Mailing Address **82 CHESTNUT RIDGE ROAD**

City **SADDLE RIVER** State **NJ** Zip Code **07458-3122**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371915**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FREDERIC M. CLIFFORD

Mailing Address **BOX 188A**

City **DUXBURY** State **MA** Zip Code **02331-0488**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 11 / 2014

Transaction ID : **SA11.368140**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ERIC CLOW

Mailing Address **27660 CENTRAL DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-4291**

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

Name of Employer **HINA GROUP** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : **SA11.371179**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1750.00

14020684210

**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 59 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) MR. ALAN COBB			Date of Receipt MM / DD / YYYY 07 / 11 / 2014
Mailing Address 77 WENDOVER WAY			Transaction ID : SA11.368226
City BEDFORD	State NH	Zip Code 03110-6056	Amount of Each Receipt this Period 200.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) MR. ALAN COBB			Date of Receipt MM / DD / YYYY 08 / 19 / 2014
Mailing Address 77 WENDOVER WAY			Transaction ID : SA11.368226B
City BEDFORD	State NH	Zip Code 03110-6056	Amount of Each Receipt this Period -200.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED	[MEMO ITEM] REDESIGNATION TO GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) MR. ALAN COBB			Date of Receipt MM / DD / YYYY 08 / 19 / 2014
Mailing Address 77 WENDOVER WAY			Transaction ID : SA11.373556
City BEDFORD	State NH	Zip Code 03110-6056	Amount of Each Receipt this Period 200.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED	[MEMO ITEM] REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

14020684211

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. LAWRENCE H. COHN

Mailing Address **45 SINGLETREE ROAD**

City **CHESTNUT HILL** State **MA** Zip Code **02467-2826**

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

Name of Employer **BRIGHAM & WOMEN'S HOSPITAL** Occupation **CARDIAC SURGEON**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : **SA11.370740**

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROGER J. CONCANNON

Mailing Address **P.O. BOX 33**

City **TILTON** State **NH** Zip Code **03276-0033**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 25 / 2014

Transaction ID : **SA11.369163**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER J. CONCANNON

Mailing Address **P.O. BOX 33**

City **TILTON** State **NH** Zip Code **03276-0033**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : **SA11.370727**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

350.00

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

14020684212

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

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

FOR LINE NUMBER: PAGE 61 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. CONLEY

Mailing Address **272 LOWELL ROAD**

City **GROTON** State **MA** Zip Code **01450-1444**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369997**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY CONLIN

Mailing Address **171 WILLOW ROAD**

City **NAHANT** State **MA** Zip Code **01908-1435**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371716**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS H. CONNORS

Mailing Address **30 KODAYA ROAD**

City **NEWTON** State **MA** Zip Code **02468-2306**

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

Name of Employer **MASS. FINANCIAL SERVICES INVESTMENT** Occupation **INVESTMENT ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369089**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

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

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

1050.00

14020684213

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

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

FOR LINE NUMBER: PAGE 62 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BRIAN CONROY

Mailing Address **81 ALBION ROAD**

City **WELLESLEY** State **MA** Zip Code **02481-1351**

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

Name of Employer **FMR** Occupation **PRESIDENT OF FIDELITY CAPITAL MARKET**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.369844**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOUGLAS CONROY

Mailing Address **39 BEEKMAN PLACE**

City **MADISON** State **CT** Zip Code **06443-2400**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : **SA11.367739**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD COOLEY

Mailing Address **140 PECKHAM ROAD**

City **WATSONVILLE** State **CA** Zip Code **95076-9747**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370347**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1050.00

14020684214

**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 63 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LAWRENCE COPE

Mailing Address **9303 TRIESTE DRIVE**

City **FORT MYERS** State **FL** Zip Code **33913-6714**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371489**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PHOEBE M. COPELAND

Mailing Address **3459 KEL CREEK COVE**

City **MEMPHIS** State **TN** Zip Code **38122-4571**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.370071**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARGARET CORASICK

Mailing Address **1517 N DEVONWOOD LN**

City **CLOVIS** State **CA** Zip Code **93619-0415**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
07 / 26 / 2014

Transaction ID : **SA11.369144**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

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

550.00

14020684215

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

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

FOR LINE NUMBER: PAGE 64 OF 485

11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MARGARET CORASICK

Mailing Address **1517 N DEVONWOOD LN**

City **CLOVIS** State **CA** Zip Code **93619-0415**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
08 / 17 / 2014

Transaction ID : **SA11.371479**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. M. TIMOTHY CORBETT

Mailing Address **11 MOUNTAIN SPRING ROAD**

City **FARMINGTON** State **CT** Zip Code **06032-1612**

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

Name of Employer **MASS MUTUAL FINANCIAL GROUP** Occupation **EXECUTIVE VICE PRESIDENT & C.I.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371298**

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CARY J. CORKIN

Mailing Address **173 CROSBY ROAD**

City **BERLIN** State **MA** Zip Code **01503-1639**

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

Name of Employer **ENTWISTLE** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368764**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

2350.00

14020684216

**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 65 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. E. GERALD CORRIGAN

Mailing Address 128 BEACON ST.

City State Zip Code
BOSTON MA 02116-1543

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

Name of Employer Occupation
GOLDMAN SACHS BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SA11.368196

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ANN S. COSTELLO

Mailing Address 4403 TOURNAY ROAD

City State Zip Code
BETHESDA MD 20816-1844

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

Name of Employer Occupation
BNY MELLON, INC. LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2014

Transaction ID : SA11.368669

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN F. COSTELLO

Mailing Address 331 LYNN STREET

City State Zip Code
MALDEN MA 02148-6212

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SA11.368218

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

3100.00

14020684217

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

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

FOR LINE NUMBER: PAGE 66 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN F. COSTELLO

Mailing Address **331 LYNN STREET**

City **MALDEN** State **MA** Zip Code **02148-6212**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370706**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ELIZABETH M. COTE

Mailing Address **39 RAYMOND STREET**

City **NASHUA** State **NH** Zip Code **03064-1954**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371770**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROBERTA L. COTE

Mailing Address **445 CURRIER ROAD**

City **HOPKINTON** State **NH** Zip Code **03229-2654**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371792**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

600.00

14020684218

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

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

FOR LINE NUMBER: PAGE 67 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DAVID COULAM

Mailing Address 415 CHURCH ST APT 3014

City State Zip Code
NASHVILLE TN 37219-1849

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

Name of Employer Occupation
COULAM CONSULTING GROUP LLC ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
07 / 02 / 2014

Transaction ID : SA11.367393

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. EDITH M. COURTENAY

Mailing Address 4003 FLINT ROAD

City State Zip Code
LOUISVILLE KY 40207-2026

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SA11.369788

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS ROAD

City State Zip Code
MARIANNA FL 32446-6889

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SA11.369684

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

1350.00

14020684219

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 68 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C. COWEN

Mailing Address **2756 INDIAN SPRINGS ROAD**

City MARIANNA	State FL	Zip Code 32446-6889
-------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt

MM 08	DD 06	YYYY 2014
-----------------	-----------------	---------------------

Transaction ID : **SA11.370634**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT C. COWEN

Mailing Address **2756 INDIAN SPRINGS ROAD**

City MARIANNA	State FL	Zip Code 32446-6889
-------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt

MM 08	DD 18	YYYY 2014
-----------------	-----------------	---------------------

Transaction ID : **SA11.371702**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER W. CRANDALL

Mailing Address **165 CONVERSE STREET #13**

City LONGMEADOW	State MA	Zip Code 01106-1755
---------------------------	--------------------	-------------------------------

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

Name of Employer MASSMUTUAL FINANCIAL GROUP	Occupation C.E.O.
---	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

MM 07	DD 23	YYYY 2014
-----------------	-----------------	---------------------

Transaction ID : **SA11.368771**

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

2750.00

14020684220

**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 69 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JOHN CRONIN

Mailing Address **395 KEARNEY CIRCLE**

City MANCHESTER	State NH	Zip Code 03104-1882
---------------------------	--------------------	-------------------------------

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

Name of Employer CRONIN, BISSON & ZALINSKY, P.C.	Occupation ATTORNEY
--	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
08	13	2014

Transaction ID : **SA11.371131**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARLAN R. CROW

Mailing Address **4700 PRESTON ROAD**

City DALLAS	State TX	Zip Code 75205-3712
-----------------------	--------------------	-------------------------------

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

Name of Employer CROW HOLDINGS	Occupation INVESTOR
--	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YYYY
08	20	2014

Transaction ID : **SA11.366588B**

Amount of Each Receipt this Period

-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. HARLAN R. CROW

Mailing Address **4700 PRESTON ROAD**

City DALLAS	State TX	Zip Code 75205-3712
-----------------------	--------------------	-------------------------------

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

Name of Employer CROW HOLDINGS	Occupation INVESTOR
--	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YYYY
08	20	2014

Transaction ID : **SA11.373701**

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

500.00

14020684221

**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 70 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. KATHERINE RAYMOND CROW

Mailing Address 4700 PRESTON ROAD

City State Zip Code
DALLAS TX 75205-3712

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SA11.366581B

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MRS. KATHERINE RAYMOND CROW

Mailing Address 4700 PRESTON ROAD

City State Zip Code
DALLAS TX 75205-3712

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SA11.373699

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. STUART M. CROW

Mailing Address 6310 MERCEDES AVENUE

City State Zip Code
DALLAS TX 75214-3006

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

Name of Employer Occupation
CROW HOLDINGS PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SA11.366620B

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

0.00

1402068422

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

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

FOR LINE NUMBER: PAGE 71 OF 485

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STUART M. CROW

Mailing Address **6310 MERCEDES AVENUE**

City **DALLAS** State **TX** Zip Code **75214-3006**

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

Name of Employer **CROW HOLDINGS** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 01 / 2014

Transaction ID : **SA11.373496**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. CROWDER

Mailing Address **40 SAWYERS POINT ROAD**

City **MIRROR LAKE** State **NH** Zip Code **03853-6057**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369449**

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT A. CRUESS

Mailing Address **6 ORCHARD VIEW DRIVE**

City **AMHERST** State **NH** Zip Code **03031-1719**

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

Name of Employer **T.F. MORAN INC.** Occupation **CIVIL ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370222**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3000.00

14020684223

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. MAUREEN F. CULLITY

Mailing Address **41 ACCORD PARK**

City **NORWELL** State **MA** Zip Code **02061-1614**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368793**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES CURVEY

Mailing Address **2 GULF SHORE BLVD S**

City **NAPLES** State **FL** Zip Code **34102-5966**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **ADMIN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : **SA11.370623**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL S. DAIGLE

Mailing Address **5 WINDING BROOK DRIVE**

City **STRATHAM** State **NH** Zip Code **03885-2330**

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

Name of Employer **DATA RISK L.L.C.** Occupation **PRESIDENT & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371978**

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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

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

2750.00

14020684224

**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 73 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GEORGE G. DANIELS

Mailing Address P.O. BOX 59-0007

City ORLANDO	State FL	Zip Code 32859-
------------------------	--------------------	---------------------------

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

Name of Employer DANIELS MANUFACTURING CORPORATION	Occupation EXECUTIVE
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YYYY
07	30	2014

Transaction ID : **SA11.369542**

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE G. DANIELS

Mailing Address P.O. BOX 59-0007

City ORLANDO	State FL	Zip Code 32859-
------------------------	--------------------	---------------------------

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

Name of Employer DANIELS MANUFACTURING CORPORATION	Occupation EXECUTIVE
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YYYY
08	20	2014

Transaction ID : **SA11.371935**

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE G. DANIELS

Mailing Address P.O. BOX 59-0007

City ORLANDO	State FL	Zip Code 32859-
------------------------	--------------------	---------------------------

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

Name of Employer DANIELS MANUFACTURING CORPORATION	Occupation EXECUTIVE
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YYYY
08	20	2014

Transaction ID : **SA11.371935B**

Amount of Each Receipt this Period

-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

5200.00

14020684225

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GEORGE G. DANIELS

Mailing Address P.O. BOX 59-0007

City: **ORLANDO** State: **FL** Zip Code: **32859-**

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

Name of Employer: **DANIELS MANUFACTURING CORPORATION** Occupation: **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200.00**

Date of Receipt: **08 / 20 / 2014**

Transaction ID : **SA11.373669**

Amount of Each Receipt this Period: **2600.00**

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
JOHN DANNEKER

Mailing Address 87 PARADISE ISLAND ROAD

City: **RINDGE** State: **NH** Zip Code: **03461-5856**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **400.00**

Date of Receipt: **08 / 01 / 2014**

Transaction ID : **SA11.369810**

Amount of Each Receipt this Period: **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BOB DASTIN

Mailing Address 300 RIVER ROAD APT. 408

City: **MANCHESTER** State: **NH** Zip Code: **03104-2484**

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

Name of Employer: **SHEEHAN, PHINNEY ET AL** Occupation: **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **08 / 18 / 2014**

Transaction ID : **SA11.371533**

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

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

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

350.00

14020684226

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 75 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MONTY DAVIS

Mailing Address **19827 CYPRESS CHURCH RD**

City **CYPRESS** State **TX** Zip Code **77433-1479**

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

Name of Employer **CORE LAB LP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SA11.367185**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MONTY DAVIS

Mailing Address **19827 CYPRESS CHURCH RD**

City **CYPRESS** State **TX** Zip Code **77433-1479**

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

Name of Employer **CORE LAB LP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SA11.367185B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MONTY DAVIS

Mailing Address **19827 CYPRESS CHURCH RD**

City **CYPRESS** State **TX** Zip Code **77433-1479**

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

Name of Employer **CORE LAB LP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SA11.367662**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

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

2600.00

14020684227

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

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

FOR LINE NUMBER: PAGE 76 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ROBERT DEGROOF

Mailing Address **4013 NEWHALL CT**

City **SAINT JAMES** State **NC** Zip Code **28461-7504**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 16 / 2014

Transaction ID : **SA11.368447**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT DEGROOF

Mailing Address **4013 NEWHALL CT**

City **SAINT JAMES** State **NC** Zip Code **28461-7504**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369384**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEVIN S. DELBRIDGE

Mailing Address **10 ANDREA DRIVE**

City **HOPKINTON** State **MA** Zip Code **01748-2027**

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

Name of Employer **HARBOUR VEST PARTNERS** Occupation **PRIVATE EQUITY MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
07 / 29 / 2014

Transaction ID : **SA11.369303**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

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

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

5400.00

14020684228

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

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

FOR LINE NUMBER: PAGE 77 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. KEVIN S. DELBRIDGE

Mailing Address **10 ANDREA DRIVE**

City **HOPKINTON** State **MA** Zip Code **01748-2027**

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

Name of Employer **HARBOUR VEST PARTNERS** Occupation **PRIVATE EQUITY MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.369303B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
MR. KEVIN S. DELBRIDGE

Mailing Address **10 ANDREA DRIVE**

City **HOPKINTON** State **MA** Zip Code **01748-2027**

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

Name of Employer **HARBOUR VEST PARTNERS** Occupation **PRIVATE EQUITY MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373604**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM RAYMOND DELONG

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368784**

Amount of Each Receipt this Period
1600.00

CONTRIBUTION

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

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

1600.00

14020684229

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. BARBARA J. DELUCCA-REA

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

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

Name of Employer **INFO REQUESTED PER BEST EFF** Occupation **INFO REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370229**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT P. DEMARCO

Mailing Address **34 ROCK MEADOW DRIVE**

City **BROCKTON** State **MA** Zip Code **02301-2915**

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

Name of Employer **CAMPANELLI INC.** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370743**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT DEMPSEY

Mailing Address **1461 LANDINGS CIRCLE**

City **SARASOTA** State **FL** Zip Code **34231-3228**

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

Name of Employer **INFO REQUESTED PER BEST EFF** Occupation **INFO REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370289**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

850.00

14020684230

**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 79 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROGELIO MONTES DEOCA

Mailing Address **43 CREEKSIDE COURT**

City **SECAUCUS** State **NJ** Zip Code **07094-3750**

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

Name of Employer **PAM AMERICAN COFFEE** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368315**

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK DERBY

Mailing Address **P.O. BOX 15**

City **CONCORD** State **NH** Zip Code **03302-0015**

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

Name of Employer **CLEVELAND, WATERS & BASS, P.A.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369110**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARGARET P. DEVINE

Mailing Address **P.O. BOX 1298**
18 FALCON WAY

City **HALES LOCATION** State **NH** Zip Code **03860-1298**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368235**

Amount of Each Receipt this Period
50.00

CONTRIBUTION

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

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

600.00

14020684231

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 485
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. MARGARET P. DEVINE

Mailing Address **P.O. BOX 1298**
18 FALCON WAY

City **HALES LOCATION** State **NH** Zip Code **03860-1298**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 01 / 2014**

Transaction ID : **SA11.370048**

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN DEWITT

Mailing Address **1903 DURFEE AVE**

City **SOUTH EL MONTE** State **CA** Zip Code **91733-3710**

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

Name of Employer **J. E. DEWITT, INC** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA11.369274**

Amount of Each Receipt this Period **150.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID DEYSHER

Mailing Address **74 STAGECOACH ROAD**

City **WILTON** State **NH** Zip Code **03086-5020**

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

Name of Employer **SELF-EMPLOYED** Occupation **REALTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371199**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **450.00**

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

14020684232

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

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

FOR LINE NUMBER: PAGE 81 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL DIBIASE

Mailing Address **158 CAMDEN ROAD**

City **NARRAGANSETT** State **RI** Zip Code **02882-2123**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **PUBLIC AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369841**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM DICKEY

Mailing Address **2332 SUL ROSS**

City **HOUSTON** State **TX** Zip Code **77098-2208**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369867**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL J. DIMARE

Mailing Address **10985 OLD CUTLER ROAD**

City **CORAL GABLES** State **FL** Zip Code **33156-4266**

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

Name of Employer **DIMARE FRESH INC.** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371933**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1750.00

14020684233

**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 82 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. NANCY DIRKS

Mailing Address 710 COLE RANCH RD

City ENCINITAS State CA Zip Code 92024-6611

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt **07 / 22 / 2014**

Transaction ID : **SA11.368660**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. NANCY DIRKS

Mailing Address 710 COLE RANCH RD

City ENCINITAS State CA Zip Code 92024-6611

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt **08 / 07 / 2014**

Transaction ID : **SA11.370505**

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN K. DIRLAN JR.

Mailing Address 32 EMERSON ROAD

City WELLESLEY State MA Zip Code 02481-3420

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

Name of Employer **LASELL COLLEGE** Occupation **EDUCATOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370730**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

350.00

14020684234

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 OF 485
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. KAREN DISALVO

Mailing Address **116 OLD ALBANY POST ROAD**

City **GARRISON** State **NY** Zip Code **10524-3416**

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

Name of Employer **PARSONS-DISALVO AGENCY INC.** Occupation **INSURANCE AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368105**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES DISHMAN

Mailing Address **2520 ROBINHOOD STREET
APARTMENT 1407**

City **HOUSTON** State **TX** Zip Code **77005-2560**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369729**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY DITCH

Mailing Address **15952 SE 36TH AVENUE**

City **SUMMERFIELD** State **FL** Zip Code **34491-5095**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
07 / 14 / 2014

Transaction ID : **SA11.368365**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

400.00

400.00

14020684235

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 84 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LARRY DITCH

Mailing Address **15952 SE 36TH AVENUE**

City **SUMMERFIELD** State **FL** Zip Code **34491-5095**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371164**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEONARD L. DOBENS

Mailing Address **BOX 572**

City **NASHUA** State **NH** Zip Code **03061-0572**

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

Name of Employer **SELF-EMPLOYED** Occupation **INSURANCE AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370613**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL DOHENY

Mailing Address **P.O. BOX 1430**
17 GAY FARM ROAD

City **NEW LONDON** State **NH** Zip Code **03257-1430**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369533**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

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

500.00

CONTRIBUTION

14020684236

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 85 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL DOHENY

Mailing Address P.O. BOX 1430
17 GAY FARM ROAD

City NEW LONDON State NH Zip Code 03257-1430

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : SA11.371981

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL DOHENY

Mailing Address P.O. BOX 1430
17 GAY FARM ROAD

City NEW LONDON State NH Zip Code 03257-1430

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : SA11.371982

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD E. DOLBEC

Mailing Address 47 CIELO DRIVE

City DOVER State NH Zip Code 03820-5608

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SA11.370034

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

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

1000.00

14020684237

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

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

FOR LINE NUMBER: PAGE 86 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. MARGARET DONNELLY

Mailing Address **6 BEALS COVE ROAD**
APARTMENT B.

City **HINGHAM** State **MA** Zip Code **02043-2307**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : **SA11.371042**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARGARET DONNELLY

Mailing Address **6 BEALS COVE ROAD**
APARTMENT B.

City **HINGHAM** State **MA** Zip Code **02043-2307**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.372087**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GLENN W. DOPF

Mailing Address **321 W. 101ST STREET**

City **NEW YORK** State **NY** Zip Code **10025-4912**

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

Name of Employer **DOPF, P.C.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : **SA11.368043**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **450.00**

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

14020684238

**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 87 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. HELEN E. DROLSBAUGH

Mailing Address **P.O. BOX 2028**

City **ORLEANS** State **MA** Zip Code **02653-6028**

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

Name of Employer **OLDE TAVERN MOTEL** Occupation **CHAMBERMAID**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370755**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VICTOR DROUIN

Mailing Address **264 FOREST ROAD**

City **WOLFEBORO** State **NH** Zip Code **03894-4013**

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

Name of Employer **GREEN MOUNTAIN COMMUNICATIONS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368774**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIMOTHY DRUMM

Mailing Address **1221 G STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002-4423**

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

Name of Employer **THE ROOSEVELT GROUP** Occupation **SENIOR ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371481**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1600.00

14020684239

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

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

FOR LINE NUMBER: PAGE 88 OF 485

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. JOYCE J. DULL

Mailing Address **176 E. HERRICK ROAD**

City **FARWELL** State **MI** Zip Code **48622-9505**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370582**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOANNE DUMAS

Mailing Address **333 RT. 101**

City **AMHERST** State **NH** Zip Code **03031-1736**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371786**

Amount of Each Receipt this Period
350.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROL S. DUNCAN

Mailing Address **710 ANDOVER STREET**

City **LOWELL** State **MA** Zip Code **01852-2035**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371305**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

850.00

14020684240

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

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

FOR LINE NUMBER: PAGE 89 OF 485

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
E. M. DUNPHY

Mailing Address **20 HILLTOP AVENUE**

City **JEFFERSON** State **MA** Zip Code **01522-1006**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371765**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DENNIS DUQUETTE

Mailing Address **495 COLUMBUS AVENUE
APARTMENT 4**

City **BOSTON** State **MA** Zip Code **02118-3250**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **VP - COMMUNICATIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 07 / 2014

Transaction ID : **SA11.367671**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD R. DUTILE

Mailing Address **24 VIRGINIA COURT**

City **HOOKSETT** State **NH** Zip Code **03106-2215**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368992**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL This Period (last page this line number only)

14020684241

**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 90 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ALVIN DWORMAN

Mailing Address **450 PARK AVENUE
8TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10022-2605**

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

Name of Employer **LEE NATIONAL CORPORATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368763**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
M EARLE

Mailing Address **18 FRESH RIVER AVENUE**

City **HINGHAM** State **MA** Zip Code **02043-2617**

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

Name of Employer **MINDLANCE CONSULTANTS** Occupation **BUSINESS ANALYST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
08 / 02 / 2014

Transaction ID : **SA11.369880**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANK EATON

Mailing Address **18 SANTA MARIA COURT**

City **ODESSA** State **TX** Zip Code **79765-8515**

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

Name of Employer **MASTER CORPORATION** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369468**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

2750.00

14020684242

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

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

FOR LINE NUMBER: PAGE 91 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN EBERLE

Mailing Address **7 ROCKRIMMON ROAD**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2338**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**
08 / 07 / 2014

Transaction ID : **SA11.370618**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROB EBERLE

Mailing Address **7 ROCKRIMMON ROAD**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2338**

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

Name of Employer **BOTTOMLINE TECHNOLOGIES** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**
08 / 07 / 2014

Transaction ID : **SA11.370620**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MELISSA EDWARDS

Mailing Address **4335 WARREN STREET NW**

City **WASHINGTON** State **DC** Zip Code **20016-2437**

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

Name of Employer **MISSY EDWARDS STRATEGIES, L.L.C.** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**
08 / 08 / 2014

Transaction ID : **SA11.370904**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1250.00**

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

14020684243

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 92 OF 485
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	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ERNEST ELLISON II

Mailing Address **6720 CHURCHILL PARK COURT**

City CHARLOTTE	State NC	Zip Code 28210-3480
--------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
08	08	2014

Transaction ID : **SA11.371045**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. ELLISON

Mailing Address **260 ODIORNE POINT ROAD**

City PORTSMOUTH	State NH	Zip Code 03801-8706
---------------------------	--------------------	-------------------------------

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

Name of Employer ELLISON SCIENTIFIC L.L.C.	Occupation ENIGNEER
--	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt

MM	DD	YYYY
07	24	2014

Transaction ID : **SA11.369077**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. ELLISON

Mailing Address **260 ODIORNE POINT ROAD**

City PORTSMOUTH	State NH	Zip Code 03801-8706
---------------------------	--------------------	-------------------------------

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

Name of Employer ELLISON SCIENTIFIC L.L.C.	Occupation ENIGNEER
--	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt

MM	DD	YYYY
08	07	2014

Transaction ID : **SA11.370508**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

250.00

14020684244

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

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

FOR LINE NUMBER: PAGE 93 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RALPH E. EMERSON

Mailing Address **5553 CONSERVATORY AVENUE**

City **VIRGINIA BEACH** State **VA** Zip Code **23455-3791**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : **SA11.368753**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RALPH E. EMERSON

Mailing Address **5553 CONSERVATORY AVENUE**

City **VIRGINIA BEACH** State **VA** Zip Code **23455-3791**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : **SA11.370452**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP H. EMERY JR.

Mailing Address **P.O. BOX 474**

City **OAKLAND** State **MD** Zip Code **21550-4474**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.369914**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

325.00

14020684245

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 94 OF 485
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	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER EMMET

Mailing Address **12 PEAPACK ROAD**

City **FAR HILLS** State **NJ** Zip Code **07931-2435**

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

Name of Employer **EMMET & COMPANY, INC.** Occupation **MUNICIPAL BONDS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370736**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP ENGLISH

Mailing Address **7350 BRIGHTSIDE ROAD**

City **BALTIMORE** State **MD** Zip Code **21212-1011**

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

Name of Employer **BROVENTURE COMPANY INC.** Occupation **PRESIDENT & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 08 / 2014**

Transaction ID : **SA11.371051**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT ERCOLINI

Mailing Address **195 BRIDLE PATH**

City **NORTH ANDOVER** State **MA** Zip Code **01845-2009**

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

Name of Employer **KEE 55 INC** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368728**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

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

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

1500.00

14020684246

**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 95 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM ESTER

Mailing Address 16931 MAPLEWILD AVENUE S.W.

City BURIEN	State WA	Zip Code 98166-3165
-----------------------	--------------------	-------------------------------

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

Name of Employer NORMAN BUILDING CO.	Occupation PRESIDENT
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

MM	DD	YYYY
07	11	2014

Transaction ID : **SA11.368187**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT D. EUSTIS

Mailing Address 78 KATO DRIVE

City SUDBURY	State MA	Zip Code 01776-2448
------------------------	--------------------	-------------------------------

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

Name of Employer LIBERTY MANAGEMENT	Occupation LAWYER
---	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt

MM	DD	YYYY
08	05	2014

Transaction ID : **SA11.370124**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN MILES EVANS

Mailing Address P.O. BOX 1272

City PORTSMOUTH	State NH	Zip Code 03802-1272
---------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt

MM	DD	YYYY
08	04	2014

Transaction ID : **SA11.370352**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

850.00

14020684247

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

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

FOR LINE NUMBER: PAGE 96 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ANTHONY EWING

Mailing Address **6323 KAREN'S CT**

City **FRISCO** State **TX** Zip Code **75034-2264**

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

Name of Employer **ADVANCED FIXTURES INC** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 08 / 2014

Transaction ID : **SA11.367721**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT W. EWING JR.

Mailing Address **596 MAIN STREET, P.O. BOX 2448**

City **NEW LONDON** State **NH** Zip Code **03257-2448**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371812**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALEXIS FALLON

Mailing Address **164 MOUNTAIN DR**

City **GILFORD** State **NH** Zip Code **03249-6762**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370523**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1350.00

14020684248

**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 97 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STEVEN M. FANALE

Mailing Address **11 IROQUOIS ROAD**

City **DANVERS** State **MA** Zip Code **01923-1232**

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

Name of Employer **COMMUNITY OF MASSACHUSETTS** Occupation **HISTORY TEACHER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369975**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM FANARAS

Mailing Address **602 FERNCROFT TOWER**

City **DANVERS** State **MA** Zip Code **01923-4054**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
07 / 27 / 2014

Transaction ID : **SA11.369153**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL R. FANNING

Mailing Address **140 COLONIAL AVENUE**

City **NORTH ANDOVER** State **MA** Zip Code **01845-6349**

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

Name of Employer **MASSMUTUAL FINANCIAL GROUP** Occupation **INSURANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369256**

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

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

2200.00

14020684249

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 OF 485

(check only one)

<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LOUIS R. FANTOZZI

Mailing Address **12 BURNHAM ROAD**

City **WINDHAM** State **NH** Zip Code **03087-1855**

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

Name of Employer **LOUIS FANTOZZI** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369113**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ANITA C. FARNSWORTH

Mailing Address **716 E. 6TH PLACE**

City **MESA** State **AZ** Zip Code **85203-6304**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368692**

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LOIS M. FARRELL

Mailing Address **60 SUMMIT ROAD**

City **BELMONT** State **MA** Zip Code **02478-1059**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371283**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1850.00

14020684250

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 OF 485

11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH K. FASSLER

Mailing Address **10002 N. 55TH STREET**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-1145**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369749**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES FEBEO JR.

Mailing Address **1 CHARLES ST. SOUTH**

City **BOSTON** State **MA** Zip Code **02116-5447**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.369279**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEITH B. FERDINANDO

Mailing Address **18 ROSE GLEN DRIVE**

City **ANDOVER** State **MA** Zip Code **01810-4704**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368785**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2500.00

14020684251

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

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

FOR LINE NUMBER: PAGE 100 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
FRED FERREIRA

Mailing Address
UNIT 27

City **MESA** State **AZ** Zip Code **85201-**

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

Name of Employer **BISHOP PLUMBING & HEATING** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2014

Transaction ID : **SA11.367847**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN FERRILLO

Mailing Address **69 SOUTH SHAKER RD.**

City **HARVARD** State **MA** Zip Code **01451-1207**

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

Name of Employer **BOSTON SYMPHONY** Occupation **PRINCIPAL OBOIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SA11.370729**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS P. FIELDS

Mailing Address **100 MIDWOOD ROAD**

City **GREENWICH** State **CT** Zip Code **06830-3837**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369516**

Amount of Each Receipt this Period
400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

850.00

14020684252

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

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

FOR LINE NUMBER: PAGE 101 OF 485

(check only one)

11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ANN FIGG

Mailing Address **410 NORTH RIDE**

City **TALLAHASSEE** State **FL** Zip Code **32303-5159**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369472**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MILTON FINE

Mailing Address **625 LIBERTY AVENUE
SUITE 3110**

City **PITTSBURGH** State **PA** Zip Code **15222-3115**

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

Name of Employer **FFC CAPITAL** Occupation **BUSINESSMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368173**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. FINK

Mailing Address **61 CHRISTIAN HILL ROAD**

City **AMHERST** State **NH** Zip Code **03031-3313**

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

Name of Employer **PAN AM SYSTEMS INC.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.370062**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **1600.00**

TOTAL This Period (last page this line number only)

14020684253

**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 102 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. HEATHER S. FINKE

Mailing Address **4920 HARDISON ROAD**

City **CHARLOTTE** State **NC** Zip Code **28226-6418**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : **SA11.370606**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS M. FINKE

Mailing Address **4920 HARDISON ROAD**

City **CHARLOTTE** State **NC** Zip Code **28226-6418**

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

Name of Employer **BABSON CAPITAL MANAGEMENT** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : **SA11.370607**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL FINN

Mailing Address **9 BUTTONWOOD DRIVE**

City **ANDOVER** State **MA** Zip Code **01810-5880**

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

Name of Employer **BANK OF NEW ENGLAND** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371930**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

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

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

7800.00

14020684254

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

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

FOR LINE NUMBER: PAGE 103 OF 485
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DANA R. FISKE

Mailing Address **5 CULLEN BAY ROAD**

City **DOVER** State **NH** Zip Code **03820-5000**

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

Name of Employer **SEA COAST AUDIOLOGY** Occupation **AUDIOLOGIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA11.369161**

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN M. FITZGERALD

Mailing Address **25 PLEASANT VALLEY STREET**

City **METHUEN** State **MA** Zip Code **01844-7201**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370227**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BETTY A. FITZPATRICK

Mailing Address **822 NORTHRIDGE DRIVE**

City **REDDING** State **CA** Zip Code **96001-0144**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371269**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1050.00

14020684255

**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 104 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RYAN M. FITZSIMONS

Mailing Address **150 DOW STREET 5TH FLOOR**

City **MANCHESTER** State **NH** Zip Code **03101-1258**

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

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370224**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RYAN M. FITZSIMONS

Mailing Address **150 DOW STREET 5TH FLOOR**

City **MANCHESTER** State **NH** Zip Code **03101-1258**

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

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.370224B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. RYAN M. FITZSIMONS

Mailing Address **150 DOW STREET 5TH FLOOR**

City **MANCHESTER** State **NH** Zip Code **03101-1258**

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

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373627**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5200.00

5200.00

14020684256

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 OF 485

(check only one)

<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ANN D. FLECK

Mailing Address **391 OLD POST ROAD**

City **WALPOLE** State **MA** Zip Code **02081-4244**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370751**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ANN D. FLECK

Mailing Address **391 OLD POST ROAD**

City **WALPOLE** State **MA** Zip Code **02081-4244**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.372071**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DANIEL FLOECK

Mailing Address **10314 GREEN TREE RD**

City **HOUSTON** State **TX** Zip Code **77042-1234**

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

Name of Employer **H L FLAKE** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 11 / 2014

Transaction ID : **SA11.371106**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

400.00

14020684257

**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 106 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PETER FLOOD

Mailing Address **P.O. BOX 229**

City **SUN VALLEY** State **ID** Zip Code **83353-0229**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370276**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DANIEL FLYNN

Mailing Address **16 PARK STREET**

City **WAKEFIELD** State **MA** Zip Code **01880-5011**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.371934**

Amount of Each Receipt this Period **2600.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NANCY H. FOHL

Mailing Address **681 SOUTH STREET**

City **CARLISLE** State **MA** Zip Code **01741-1517**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372064**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

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

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

3300.00

14020684258

**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 107 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MICHAEL T FOLEY SR.

Mailing Address **78 PARKSIDE AVENUE**

City **BRAINTREE** State **MA** Zip Code **02184-3102**

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

Name of Employer **DEPARTMENT OF HOMELAND SECURITY** Occupation **TRANSPORTATION SECURITY ADMINSTR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 03 / 2014

Transaction ID : **SA11.369889**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBRT FOLLETT

Mailing Address **350 BOSTON RD**

City **BILLERICA** State **MA** Zip Code **01821-1812**

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

Name of Employer **MASS STATE POLICE** Occupation **STATE POLICE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SA11.368732**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CYRUS F. FREIDHEIM JR.

Mailing Address **11105 OLD HARBOUR ROAD**

City **NORTH PALM BEACH** State **FL** Zip Code **33408-3421**

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

Name of Employer **SUN TIMES MEDIA** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368780**

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

2550.00

14020684259

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

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

FOR LINE NUMBER: PAGE 108 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD C. FREYMAN

Mailing Address **5349 HUMBOLDT DRIVE**

City **ROCKLIN** State **CA** Zip Code **95765-4815**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : **SA11.369314**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WAYNE S. FRIESTAD

Mailing Address **1528 LANGHAM TERRACE**

City **LAKE MARY** State **FL** Zip Code **32746-1971**

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

Name of Employer **FLORIDA EMERGENCY PHYSICIANS** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371236**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DONALD H. FRITZ

Mailing Address **187 UNION STREET**

City **PETERBOROUGH** State **NH** Zip Code **03458-1058**

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

Name of Employer **SELF-EMPLOYED** Occupation **D.V.M.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : **SA11.369240**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

1250.00

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

14020684260

**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 109 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ALICE J. FRY

Mailing Address **5415 ALHAMBRA VALLEY ROAD**

City **MARTINEZ** State **CA** Zip Code **94553-9606**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370554**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT M. FUREK

Mailing Address **1370 CUTLER COURT**

City **MARCO ISLAND** State **FL** Zip Code **34145-5841**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370365**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. EVANGELINE B. FUSSCAS

Mailing Address **249 LINDEN STREET**

City **MANCHESTER** State **NH** Zip Code **03104-3319**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **670.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368803**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

600.00

600.00

14020684261

**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 110 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) MS. EVANGELINE B. FUSSCAS		Date of Receipt MM / DD / YYYY 08 / 01 / 2014
Mailing Address 249 LINDEN STREET		Transaction ID : SA11.369894
City MANCHESTER	State NH	Zip Code 03104-3319
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 670.00	

Full Name (Last, First, Middle Initial) MS. EVANGELINE B. FUSSCAS		Date of Receipt MM / DD / YYYY 08 / 01 / 2014
Mailing Address 249 LINDEN STREET		Transaction ID : SA11.370024
City MANCHESTER	State NH	Zip Code 03104-3319
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 670.00	

Full Name (Last, First, Middle Initial) MR. ROBERT H. GAGNE		Date of Receipt MM / DD / YYYY 07 / 23 / 2014
Mailing Address 1300 BENM FRANKLIN DRIVE SUITE 601		Transaction ID : SA11.368786
City SARASOTA	State FL	Zip Code 34236-2145
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

14020684262

**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 111 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DENIS G. GAGNON

Mailing Address **9 STONINGTON DRIVE**

City **WILBRAHAM** State **MA** Zip Code **01095-2336**

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

Name of Employer **EXCEL DRYER, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368532**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK GAGNON

Mailing Address **34 CHESTNUT DRIVE**

City **ALLENSTOWN** State **NH** Zip Code **03275-2619**

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

Name of Employer **GRANITE STATE RETIREMENT** Occupation **CERTIFIED FINANCIAL PLANNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371200**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KAREN R. GALAT

Mailing Address **163 KENSINGTON ROAD**

City **HAMPTON FALLS** State **NH** Zip Code **03844-2211**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369641**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **1000.00**

TOTAL This Period (last page this line number only)

14020684263

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MARTIN GALLAGHER

Mailing Address **189 FRONT STREET**

City **SCITUATE** State **MA** Zip Code **02066-1331**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371485**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEE GARCIA

Mailing Address **10641 E. PROSPECT POINT DR**

City **SCOTTSDALE** State **AZ** Zip Code **85262-3320**

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

Name of Employer **FIVE MILE RIVER INV. MGMT** Occupation **INVESTMENT ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370467**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. GARDNER

Mailing Address **17 BERKLEY CIRCLE**

City **HINGHAM** State **MA** Zip Code **02043-3354**

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

Name of Employer **UNION ST MANAGEMENT** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368572**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

450.00

14020684264

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

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

FOR LINE NUMBER: PAGE 113 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. GARDNER

Mailing Address **17 BERKLEY CIRCLE**

City **HINGHAM** State **MA** Zip Code **02043-3354**

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

Name of Employer **UNION ST MANAGEMENT** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369693**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY H. GARNETT

Mailing Address **123 GRANITE STREET**

City **MEDFIELD** State **MA** Zip Code **02052-3314**

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

Name of Employer **MEDFIELD EYECARE** Occupation **APPLICATION OPTICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368328**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY H. GARNETT

Mailing Address **123 GRANITE STREET**

City **MEDFIELD** State **MA** Zip Code **02052-3314**

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

Name of Employer **MEDFIELD EYECARE** Occupation **APPLICATION OPTICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369811**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

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

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

225.00

14020684265

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

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

FOR LINE NUMBER: PAGE 114 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. MARY H. GARNETT

Mailing Address **123 GRANITE STREET**

City **MEDFIELD** State **MA** Zip Code **02052-3314**

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

Name of Employer **MEDFIELD EYECARE** Occupation **APPLICATION OPTICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371150**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARILYN V. GEARHART

Mailing Address **P.O. BOX 427**

City **WATERVILLE** State **WA** Zip Code **98858-0427**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370355**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD L. GELFOND

Mailing Address **110 E. 59TH STREET
SUITE 2100**

City **NEW YORK** State **NY** Zip Code **10022-1304**

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

Name of Employer **IMAX CORPORATION** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371806**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

3150.00

14020684266

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
NEIL GERALD

Mailing Address **85 FRIEDSAM DR**

City **CHESTERFIELD** State **NH** Zip Code **03443-3804**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 11 / 2014

Transaction ID : **SA11.371098**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LAURENCE GERBER

Mailing Address **60 LAUREL ROAD**

City **WESTON** State **MA** Zip Code **02493-1632**

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

Name of Employer **EPOCH SENIOR LIVING, LLC** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369846**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOOCB GIARGIARI

Mailing Address **198 CORDAVILLE ROAD**

City **ASHLAND** State **MA** Zip Code **01721-1003**

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

Name of Employer **SELF-EMPLOYED** Occupation **FINANCIAL ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370700**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

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

3800.00

14020684267

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

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

FOR LINE NUMBER: PAGE 116 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. SEAN P. GILL

Mailing Address **102 SCOBIE POND ROAD**

City **DERRY** State **NH** Zip Code **03038-3730**

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

Name of Employer **U.S. COAST GUARD** Occupation **MILITARY OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : **SA11.370773**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REV. THOMAS M. GILLESPIE

Mailing Address **63 WINTER STREET**

City **NORTH READING** State **MA** Zip Code **01864-2264**

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

Name of Employer **ROMAN CATHOLIC ARCHDIOCESE BOSTON** Occupation **CATHOLIC PRIEST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.369962**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LESLIE GILLIAM

Mailing Address **P.O. BOX 820**

City **KESWICK** State **VA** Zip Code **22947-0820**

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

Name of Employer **CUMBERLAND DEVELOPMENT** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : **SA11.369301**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

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

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

5550.00

14020684268

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

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

FOR LINE NUMBER: PAGE 117 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
LESLIE GILLIAM

Mailing Address **P.O. BOX 820**

City **KESWICK** State **VA** Zip Code **22947-0820**

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

Name of Employer **CUMBERLAND DEVELOPMENT** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.369301B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
LESLIE GILLIAM

Mailing Address **P.O. BOX 820**

City **KESWICK** State **VA** Zip Code **22947-0820**

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

Name of Employer **CUMBERLAND DEVELOPMENT** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373598**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
RICHARD GILLIAM

Mailing Address **P.O. BOX 820**

City **KESWICK** State **VA** Zip Code **22947-0820**

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

Name of Employer **CUMBERLAND DEVELOP** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 29 / 2014

Transaction ID : **SA11.369300**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

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

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

5200.00

5200.00

14020684269

**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 118 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
RICHARD GILLIAM

Mailing Address **P.O. BOX 820**

City **KESWICK** State **VA** Zip Code **22947-0820**

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

Name of Employer **CUMBERLAND DEVELOP** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 16 / 2014

Transaction ID : **SA11.369300B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
RICHARD GILLIAM

Mailing Address **P.O. BOX 820**

City **KESWICK** State **VA** Zip Code **22947-0820**

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

Name of Employer **CUMBERLAND DEVELOP** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 16 / 2014

Transaction ID : **SA11.373596**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
MRS. GLADYS H. GILMARTIN

Mailing Address **7739 SE LOBLOLLY BAY DRIVE**

City **HOBE SOUND** State **FL** Zip Code **33455-3830**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369551**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

250.00

250.00

14020684270

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

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

FOR LINE NUMBER: PAGE 119 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DONALD E. GINGRAS

Mailing Address **7 CAMERON DRIVE**

City **NASHUA** State **NH** Zip Code **03062-2500**

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

Name of Employer **DONALD GINGRAS REALTY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA11.371024**

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD E. GINGRAS

Mailing Address **7 CAMERON DRIVE**

City **NASHUA** State **NH** Zip Code **03062-2500**

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

Name of Employer **DONALD GINGRAS REALTY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
08 / 16 / 2014

Transaction ID : **SA11.371024B**

Amount of Each Receipt this Period
-1400.00
CONTRIBUTION
**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. DONALD E. GINGRAS

Mailing Address **7 CAMERON DRIVE**

City **NASHUA** State **NH** Zip Code **03062-2500**

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

Name of Employer **DONALD GINGRAS REALTY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
08 / 16 / 2014

Transaction ID : **SA11.373646**

Amount of Each Receipt this Period
1400.00
CONTRIBUTION
**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

2000.00

2000.00

14020684271

**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 120 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. LINDA GINGRAS

Mailing Address **7 CAMERON DRIVE**

City **NASHUA** State **NH** Zip Code **03062-2500**

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

Name of Employer **GATE CITY ELECTRIC** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : **SA11.371027**

Amount of Each Receipt this Period
1750.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER GISTIS

Mailing Address **269 HANOVER STREET**

City **HANOVER** State **MA** Zip Code **02339-2245**

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

Name of Employer **LINCHUIS HOTEL CORPORATION** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370169**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA GLADSTONE

Mailing Address **15 MARSTON DR.**

City **BEDFORD** State **NH** Zip Code **03110-4338**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371752**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

2500.00

14020684272

**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 121 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. D. DAVID GLASS

Mailing Address **P.O. BOX 688**

City **GRANTHAM** State **NH** Zip Code **03753-0688**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370349**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LYNDA B. GLAVIN

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371758**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. GLAVIN

Mailing Address **120 PAGET COURT**

City **VERO BEACH** State **FL** Zip Code **32963-3716**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 MM / DD / YYYY
07 / 09 / 2014

Transaction ID : **SA11.368039**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

3350.00

14020684273

**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 122 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. GLAVIN

Mailing Address **120 PAGET COURT**

City **VERO BEACH** State **FL** Zip Code **32963-3716**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA11.371025**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. GLAVIN JR.

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371759**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS G. GOEBEL

Mailing Address **6855 ROSEWOOD CIRCLE**

City **INDEPENDENCE** State **OH** Zip Code **44131-4960**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370179**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3850.00**

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

14020684274

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

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

FOR LINE NUMBER: PAGE 123 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN GOLDEN

Mailing Address **39 OLIVER'S COVE LANE**

City **WATER MILL** State **NY** Zip Code **11976-3123**

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

Name of Employer **JOHN GOLDEN ASSOCIATES** Occupation **INVESTMENTS AND FINANCIAL ADVISORY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371589**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARC S. GOLDMAN

Mailing Address **1500 S. OCEAN BLVD. #501**

City **BOCA RATON** State **FL** Zip Code **33432-8523**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371542**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROSALIND GORIN

Mailing Address **114 BRATTLE STREET**

City **CAMBRIDGE** State **MA** Zip Code **02138-3423**

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

Name of Employer **H.N. GORIN, INC.** Occupation **REAL ESTATE INVESTMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371296**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

5700.00

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

14020684275

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JAMES GORMAN

Mailing Address **P.O. BOX 2599**

City **MANSFIELD** State **OH** Zip Code **44906-0599**

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

Name of Employer **FOREMAN RUPP, CO.** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369559**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY L. GOULD

Mailing Address **P.O. BOX 367**

City **TWIN MOUNTAIN** State **NH** Zip Code **03595-0367**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369173**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD C. GRAHAM

Mailing Address **1420 SIXTH AVENUE**

City **YORK** State **PA** Zip Code **17403-2620**

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

Name of Employer **GRAHAM CAPITAL** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369509**

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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

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

2200.00

14020684276

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
PHILIP GRAHAM

Mailing Address **30 OLD NORTH TRAIL**

City **MANSFIELD** State **MA** Zip Code **02048-3073**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **SENIOR VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : **SA11.369299**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVEN GRAHAM

Mailing Address **124 STONEHILL RD**

City **E. LONGMEADOW** State **MA** Zip Code **01028-1374**

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

Name of Employer **TONER PLASTICS INC** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : **SA11.367726**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK R. GRANARA

Mailing Address **95 SHRINE ROAD**

City **NORWELL** State **MA** Zip Code **02061-2235**

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

Name of Employer **G.I.C.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA11.368466**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1500.00

14020684277

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

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

FOR LINE NUMBER: PAGE 126 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
BRUCE GREENAN

Mailing Address **508 BAROOSHIAN COURT**

City **AUBURN** State **CA** Zip Code **95603-3679**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368609**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TERRY GREGORY

Mailing Address **20 WOODS END RD**

City **DEDHAM** State **MA** Zip Code **02026-5823**

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

Name of Employer **CTLCAPITAL** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371559**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAURENCE GRIGGS

Mailing Address **12 CLOVER HILL DRIVE**

City **STAFFORD** State **VA** Zip Code **22556-3629**

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

Name of Employer **SELF-EMPLOYED** Occupation **SYSTEMS ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371846**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

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

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

400.00

14020684278

**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 127 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID F. GROHNE

Mailing Address **25907 MURPHY ROAD**

City **WILMINGTON** State **IL** Zip Code **60481-8340**

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

Name of Employer **INDEPENDENCE TUBE CORPORATION** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369524**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARGARET T. GROHNE

Mailing Address **25907 MURPHY ROAD**

City **WILMINGTON** State **IL** Zip Code **60481-8340**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369523**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERRY GROSSMAN

Mailing Address **11126 ELMVIEW PLACE**

City **GREAT FALLS** State **VA** Zip Code **22066-3014**

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

Name of Employer **HOULIHAN LOKEY** Occupation **INVESTMENT BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 15 / 2014

Transaction ID : **SA11.368373**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

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

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

5350.00

14020684279

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

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

FOR LINE NUMBER: PAGE 128 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CLIFFORD J. GRUM

Mailing Address P.O. BOX 368

City State Zip Code
DIBOLL TX 75941-0368

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SA11.368175

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN J. GRZYWACZ

Mailing Address 405 CRESTVIEW CIRCLE

City State Zip Code
MANCHESTER NH 03104-1801

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SA11.371779

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ANDRE T. GUAY

Mailing Address 2000 OCEAN BLVD, UNIT 3

City State Zip Code
RYE NH 03870-2750

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : SA11.371952

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

1600.00

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

14020684280

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. GUNDY

Mailing Address P.O. BOX 2394

City: **NEW LONDON** State: **NH** Zip Code: **03257-2394**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350.00**

Date of Receipt: **08 / 18 / 2014**
Transaction ID : SA11.371530

Amount of Each Receipt this Period: **100.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. GUNDY

Mailing Address P.O. BOX 2394

City: **NEW LONDON** State: **NH** Zip Code: **03257-2394**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350.00**

Date of Receipt: **08 / 19 / 2014**
Transaction ID : SA11.371844

Amount of Each Receipt this Period: **250.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL GUTHRIE

Mailing Address 16 RIVA RIDGE

City: **LEMONT** State: **IL** Zip Code: **60439-9105**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1000.00**

Date of Receipt: **08 / 08 / 2014**
Transaction ID : SA11.371068

Amount of Each Receipt this Period: **1000.00**
CONTRIBUTION

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

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

1350.00

14020684281

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

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

FOR LINE NUMBER: PAGE 130 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOE GUYTON

Mailing Address **4 SOUTH ROAD**

City **RYE BEACH** State **NH** Zip Code **03871-9004**

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

Name of Employer **SELF-EMPLOYED** Occupation **FINANCIAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371482**

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOE GUYTON

Mailing Address **4 SOUTH ROAD**

City **RYE BEACH** State **NH** Zip Code **03871-9004**

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

Name of Employer **SELF-EMPLOYED** Occupation **FINANCIAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371482B**

Amount of Each Receipt this Period
-900.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. JOE GUYTON

Mailing Address **4 SOUTH ROAD**

City **RYE BEACH** State **NH** Zip Code **03871-9004**

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

Name of Employer **SELF-EMPLOYED** Occupation **FINANCIAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.373655**

Amount of Each Receipt this Period
900.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

1500.00

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

14020684282

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

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

FOR LINE NUMBER: PAGE 131 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. ANGELA HAHN

Mailing Address **835 OLD POST RD.**

City **COTUIT** State **MA** Zip Code **02635-2934**

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

Name of Employer **SELF-EMPLOYED** Occupation **ANGELA HAHN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371969**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ANGELA HAHN

Mailing Address **835 OLD POST RD.**

City **COTUIT** State **MA** Zip Code **02635-2934**

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

Name of Employer **SELF-EMPLOYED** Occupation **ANGELA HAHN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371969B**

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MS. ANGELA HAHN

Mailing Address **835 OLD POST RD.**

City **COTUIT** State **MA** Zip Code **02635-2934**

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

Name of Employer **SELF-EMPLOYED** Occupation **ANGELA HAHN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.373673**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5200.00

14020684283

**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 132 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN F. HALEY JR.

Mailing Address **5 AILEEN TERRACE**

City **GLOUCESTER** State **MA** Zip Code **01930-4401**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368592**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEVIN J. HALLORAN

Mailing Address **34 BROAD STREET**

City **NASHUA** State **NH** Zip Code **03064-2013**

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

Name of Employer **L.P.L. FINANCIAL** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371785**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK HALSOR

Mailing Address **98 ATLANTIC AVENUE**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2309**

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

Name of Employer **CAMBRIDGE COMMUNICATION LTD** Occupation **PILOT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369121**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

2250.00

14020684284

**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 133 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. VICKI HALSOR

Mailing Address **98 ATLANTIC AVENUE**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2309**

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

Name of Employer **AMERICAN AIRLINES** Occupation **FLIGHT ATTENDANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369119**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGARET HALVORSON

Mailing Address **148 S. LAS PALMAS AVE**

City **LOS ANGELES** State **CA** Zip Code **90004-1050**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
07 / 29 / 2014

Transaction ID : **SA11.369312**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL HAMILTON

Mailing Address **413 WEST CREEK STREET**

City **FREDERICKSBURG** State **TX** Zip Code **78624-3113**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370735**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1750.00

14020684285

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 134 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. TIMOTHY HANSON

Mailing Address **535 CENTRAL ROAD**

City **RYE** State **NH** Zip Code **03870-2529**

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

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371959**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD B. HARDY

Mailing Address **41 MCGREGORY ROAD**

City **STURBRIDGE** State **MA** Zip Code **01566-1526**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371516**

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES F. HARMS

Mailing Address **1405 W. WIGHT STREET**

City **NEVADA** State **MO** Zip Code **64772-2884**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370669**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

900.00

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

14020684286

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

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

FOR LINE NUMBER: PAGE 135 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. BOBBYE F. HARRIS

Mailing Address **135 WINDSOR DRIVE**

City **CALHOUN** State **GA** Zip Code **30701-2055**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369579**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOANNE HARTLEY

Mailing Address **69 CHESTERTON RD.**

City **WELLESLEY** State **MA** Zip Code **02481-1106**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371189**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM RALPH HARTMAN

Mailing Address **30 PROSPECT STREET**

City **LITCHFIELD** State **CT** Zip Code **06759-2502**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371731**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

600.00

14020684287

**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 136 OF 485
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	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT W. HATCH

Mailing Address **601 W. 55TH STREET**

City **KANSAS CITY** State **MO** Zip Code **64113-1101**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370845**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER P. HAVENSTEIN SR.

Mailing Address **112 DEWITT DRIVE**

City **ALTON** State **NH** Zip Code **03809-6022**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371756**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARILYN HAYDEN

Mailing Address **352 DEEPWOOD ROAD**

City **BARRINGTON** State **IL** Zip Code **60010-8618**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370444**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **4100.00**

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

14020684288

**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 137 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
KERRI HAYES

Mailing Address **41 GAIL RD**

City **MERRIMACK** State **NH** Zip Code **03054-4555**

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

Name of Employer **RAYTHEON BBN TECHNOLOGIES** Occupation **SR. TECHNICAL PLANNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371522**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. HAYES

Mailing Address **P.O. BOX 804**

City **DOVER** State **MA** Zip Code **02030-0804**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369994**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FREDERICK HAYNES

Mailing Address **12 ALGONQUIAN DR**

City **NATICK** State **MA** Zip Code **01760-6095**

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

Name of Employer **LIVINGSTON & HAYNES P.C.** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
07 / 28 / 2014

Transaction ID : **SA11.369277**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1000.00

1000.00

14020684289

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

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

FOR LINE NUMBER: PAGE 138 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
GUY HAYNES

Mailing Address **26 BASSY ST**

City **LEBANON** State **NH** Zip Code **03766-1435**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : **SA11.368613**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARRY J. HEALER JR.

Mailing Address **P.O. BOX 533**

City **PETERBOROUGH** State **NH** Zip Code **03458-0533**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : **SA11.368912**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARRY J. HEALER JR.

Mailing Address **P.O. BOX 533**

City **PETERBOROUGH** State **NH** Zip Code **03458-0533**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : **SA11.370715**

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

SEE REATTRIBUTION

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

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

3150.00

14020684290

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. CYNTHIA P. HEALER

Mailing Address **P.O. BOX 533**

City **PETERBOROUGH** State **NH** Zip Code **03458-0533**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1900.00**

Date of Receipt
 MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.372887**

Amount of Each Receipt this Period
1900.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION FROM SPOUSE

B. Full Name (Last, First, Middle Initial)
MR. HARRY J. HEALER JR.

Mailing Address **P.O. BOX 533**

City **PETERBOROUGH** State **NH** Zip Code **03458-0533**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt
 MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370715B**

Amount of Each Receipt this Period
-1900.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)
MR. HARRY J. HEALER JR.

Mailing Address **P.O. BOX 533**

City **PETERBOROUGH** State **NH** Zip Code **03458-0533**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.372097**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1000.00**

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

14020684291

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

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

FOR LINE NUMBER: PAGE 140 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HARRY J. HEALER JR.

Mailing Address P.O. BOX 533

City State Zip Code
PETERBOROUGH NH 03458-0533

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : SA11.372097B

Amount of Each Receipt this Period
-1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. HARRY J. HEALER JR.

Mailing Address P.O. BOX 533

City State Zip Code
PETERBOROUGH NH 03458-0533

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : SA11.373678

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
KEVIN HEANEY

Mailing Address 171 CEDAR STREET

City State Zip Code
DEDHAM MA 02026-3332

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

Name of Employer Occupation
LIFE CARE CENTERS OF AMERICA DIVISION MARKETING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SA11.371747

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

250.00

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

14020684292

**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 141 OF 485
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	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
NORM HEBERT

Mailing Address **22 HICKORY DRIVE**

City **AMHERST** State **NH** Zip Code **03031-2222**

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

Name of Employer **CERTIFIED NETWORK CONSULANTS, LLC.** Occupation **I.T. ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : **SA11.370901**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RALPH HECHT

Mailing Address **6511 MERCER STREET**

City **HOUSTON** State **TX** Zip Code **77005-3735**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370160**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER O. HEFRON

Mailing Address **25 COBB STREET
UNIT F102**

City **MANSFIELD** State **MA** Zip Code **02048-4508**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370351**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1000.00

1000.00

14020684293

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

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

FOR LINE NUMBER: PAGE 142 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHARLES HENDERSON

Mailing Address **9 SLEEPY HOLLOW LANE**

City **NEWTOWN SQUARE** State **PA** Zip Code **19073-3914**

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

Name of Employer **SELF-EMPLOYED** Occupation **INSURANCE CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368916**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES B. HENDERSON

Mailing Address **1100 SW SHORELINE DRIVE**

City **PALM CITY** State **FL** Zip Code **34990-4542**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370182**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT HENDERSON

Mailing Address **4608 SLICE COURT**

City **COLLEGE STATION** State **TX** Zip Code **77845-8998**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368841**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1000.00

14020684294

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 143 OF 485
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	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT F. HENDRICKSON

Mailing Address **132 VICTORIA MEWS**

City **PRINCETON** State **NJ** Zip Code **08542-3745**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
07 / 26 / 2014

Transaction ID : **SA11.369142**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN K. HENNESSY

Mailing Address **2 TUCKERWOOD COURT**

City **NASHUA** State **NH** Zip Code **03064-8101**

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

Name of Employer **ASTRAZENECA** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : **SA11.369187**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN K. HENNESSY

Mailing Address **2 TUCKERWOOD COURT**

City **NASHUA** State **NH** Zip Code **03064-8101**

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

Name of Employer **ASTRAZENECA** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371517**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **700.00**

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

14020684295

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

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

FOR LINE NUMBER: PAGE 144 OF 485

11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GAVIN HERBERT

Mailing Address **4100 CALLE ISABELLA**

City **SAN CLEMENTE** State **CA** Zip Code **92672-4568**

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

Name of Employer **GAVIN HERBERT EYE INSTITUTE** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368473**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL S. HERENDEEN

Mailing Address **7 MAPLE ROAD**

City **CHATHAM** State **NJ** Zip Code **07928-1111**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369984**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEPHEN HERSON

Mailing Address **146 WHITNEY HILL RD**

City **TUNBRIDGE** State **VT** Zip Code **05077-9642**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 08 / 2014

Transaction ID : **SA11.367728**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

850.00

14020684296

**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 145 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GEORGE HERZLINGER

Mailing Address **560 CONCORD AVENUE**

City **BELMONT** State **MA** Zip Code **02478-2028**

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

Name of Employer **BELMONT INSTRUMENT CORPORATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368941**

Amount of Each Receipt this Period
600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY HIATT

Mailing Address **80 LITTLE BAY ROAD**

City **NEWINGTON** State **NH** Zip Code **03801-2709**

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

Name of Employer **PERFORMANCE BUSINESS SOLUTIONS** Occupation **EXPENSE REDUCTION CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371938**

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DENISE D. HILGER

Mailing Address **13 JAMIE LANE**

City **HOPKINTON** State **MA** Zip Code **01748-1544**

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

Name of Employer **FIDELITY INVESTMENTS** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368770**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2600.00

14020684297

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
LT. COL. BETTY J. HILL USAF (RET.)

Mailing Address **8403 TIMBER FAIR**

City State Zip Code
SAN ANTONIO TX 78250-4191

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369249**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. OLAV HINKE

Mailing Address **5400 SNAPPER CREEK ROAD**

City State Zip Code
CORAL GABLES FL 33156-3446

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371918**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEIL HIRSCH

Mailing Address **12076 POLO CLUB ROAD**

City State Zip Code
WELLINGTON FL 33414-7024

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2014

Transaction ID : **SA11.368383**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1800.00

14020684298

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

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

FOR LINE NUMBER: PAGE 147 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. FREDERICK E. HITCHCOCK JR.

Mailing Address **PO BOX 8610**

City State Zip Code
CITY OF INDUSTRY CA 91748-0610

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

Name of Employer Occupation
HITCHCOCK AUTOMOTIVE RESOURCES AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368117**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THURMAN R. HODGES

Mailing Address **211 W. SILVERLEAF STREET**

City State Zip Code
GREER SC 29650-2752

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.370085**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE R. HOGUET

Mailing Address **17 CHESHAM ROAD**

City State Zip Code
BROOKLINE MA 02445-5828

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

Name of Employer Occupation
STATE STREET GLOBAL ADVISORS SR. PORTFOLIO MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
08 / 12 / 2014

Transaction ID : **SA11.371121**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

3350.00

14020684299

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

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

FOR LINE NUMBER: PAGE 148 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. E. ALAN HOLROYDE

Mailing Address **1 ACACIA DRIVE**

City **BELVEDERE TIBURON** State **CA** Zip Code **94920-1101**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370643**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALEX HOROVITZ

Mailing Address **7 JEFFERSON DRIVE**

City **ACTON** State **MA** Zip Code **01720-3103**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369866**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM K. HOSKINS

Mailing Address **85 E. INDIA ROW
UNIT 20 A/B**

City **BOSTON** State **MA** Zip Code **02110-3320**

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

Name of Employer **HOSKINS & ASSOCIATES** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371928**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

TOTAL This Period (last page this line number only).....

3350.00

14020684300

**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 149 OF 485
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	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JOHN HOSTETTER

Mailing Address **206 W BEL AIR AVE**

City **ABERDEEN** State **MD** Zip Code **21001-2421**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOSTETTER AGENCY, INC** Occupation **BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369126**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD K. HOUSEWORTH

Mailing Address **7501 E. THOMPSON PEAK PARKWAY
UNIT 232**

City **SCOTTSDALE** State **AZ** Zip Code **85255-4533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368547**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MING CHEN HSU

Mailing Address **828 MASSELIN AVENUE**

City **LOS ANGELES** State **CA** Zip Code **90036-4722**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368525**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

1400.00

14020684301

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
THOMAS HUFF

Mailing Address **9575 LE SAINT DR**

City **FAIRFIELD** State **OH** Zip Code **45014-5447**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CIP RETAIL** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369323**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES E. HUGEL

Mailing Address **P.O. BOX 438**

City **MELVIN VILLAGE** State **NH** Zip Code **03850-0438**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.370036**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT G. HUGHES

Mailing Address **16 WILLOW STREET
UNIT 210**

City **MELROSE** State **MA** Zip Code **02176-3885**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368924**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

14020684302

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 151 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT G. HUGHES

Mailing Address **16 WILLOW STREET**
UNIT 210

City **MELROSE** State **MA** Zip Code **02176-3885**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.372063**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP HULSIZER

Mailing Address **602 1ST STREET**

City **PALACIOS** State **TX** Zip Code **77465-4908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE WELDED BOAT COMPANY** Occupation **WELDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370435**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP HULSIZER

Mailing Address **602 1ST STREET**

City **PALACIOS** State **TX** Zip Code **77465-4908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE WELDED BOAT COMPANY** Occupation **WELDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA11.370435B**

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

SUBTOTAL of Receipts This Page (optional)..... **5450.00**

TOTAL This Period (last page this line number only).....

14020684303

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PHILIP HULSIZER

Mailing Address **602 1ST STREET**

City **PALACIOS** State **TX** Zip Code **77465-4908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE WELDED BOAT COMPANY** Occupation **WELDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA11.373635**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. BARRY HUMPHRIES

Mailing Address **4945 OLENTANGY BLVD.**

City **COLUMBUS** State **OH** Zip Code **43214-2049**

FEC ID number of contributing federal political committee. **C**

Name of Employer **R. G. M. C.** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA11.368541**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BARRY HUMPHRIES

Mailing Address **4945 OLENTANGY BLVD.**

City **COLUMBUS** State **OH** Zip Code **43214-2049**

FEC ID number of contributing federal political committee. **C**

Name of Employer **R. G. M. C.** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.370037**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

400.00

TOTAL This Period (last page this line number only).....

14020684304

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 153 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. CATHERINE O. HUNT

Mailing Address **7 NIBLICK LANE**

City **GREENLAND** State **NH** Zip Code **03840-2623**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AMOSKEAG ANESTHESIA** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371186**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. SEAN E. HUNT

Mailing Address **7 NIBLICK LANE**

City **GREENLAND** State **NH** Zip Code **03840-2623**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DARTMOUTH-HITCHCOCK CLINIC** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371201**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SANDRA IERARDI

Mailing Address **62 CHESTNUT HILL ROAD**

City **AMHERST** State **NH** Zip Code **03031-1503**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOFTWARE EVOLUTION, INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
08 / 12 / 2014

Transaction ID : **SA11.371118**

Amount of Each Receipt this Period
700.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

14020684305

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 154 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PAUL J. ISAAC

Mailing Address **75 PROSPECT AVENUE**

City **LARCHMONT** State **NY** Zip Code **10538-3634**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370430**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. ANTHONY D. IVANKOVIC

Mailing Address **1653 W. CONGRESS PARKWAY**

City **CHICAGO** State **IL** Zip Code **60612-3833**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2014

Transaction ID : **SA11.368188**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. VINCENT JACINTHO

Mailing Address **161 SUMMER STREET**

City **BRIDGEWATER** State **MA** Zip Code **02324-2627**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370260**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3600.00

14020684306

**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 155 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BOOTH D. JACKSON

Mailing Address **12 LAKEVIEW ROAD**

City **LITTLETON** State **MA** Zip Code **01460-1635**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.370022**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. JACOBSON

Mailing Address **16 HIGHLAND AVENUE**

City **CAMBRIDGE** State **MA** Zip Code **02139-1016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7800.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370186**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN C. JANIGIAN

Mailing Address **66 NOLLS FARM ROAD**

City **AUBURN** State **NH** Zip Code **03032-3334**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BERKSHIRE HATHAWAY VERANI REALTY** Occupation **PROPERTY MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371805**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5800.00

14020684307

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD JAQUITH

Mailing Address **4515 WILLOWBROOK LANE**

City **WILSON** State **WY** Zip Code **83014-9208**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369427**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ERIC M. JAVITS

Mailing Address **150 BRADLEY PLACE #407**

City **PALM BEACH** State **FL** Zip Code **33480-3836**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : **SA11.369112**

Amount of Each Receipt this Period
600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
IV JEANSONNE

Mailing Address **7266 TORN DRIVE**

City **BATON ROUGE** State **LA** Zip Code **70806-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369557**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

14020684308

**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 157 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JOHN JENNINGS

Mailing Address P.O. BOX 738

City: **GRANTHAM** State: **NH** Zip Code: **03753-0738**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350.00**

Date of Receipt: **08 / 11 / 2014**

Transaction ID : **SA11.371103**

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES LARRY JODRY

Mailing Address 13 DRAYCOACH DRIVE

City: **CHELMSFORD** State: **MA** Zip Code: **01824-1023**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **08 / 04 / 2014**

Transaction ID : **SA11.370258**

Amount of Each Receipt this Period: **50.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES LARRY JODRY

Mailing Address 13 DRAYCOACH DRIVE

City: **CHELMSFORD** State: **MA** Zip Code: **01824-1023**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **08 / 20 / 2014**

Transaction ID : **SA11.372070**

Amount of Each Receipt this Period: **50.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

14020684309

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. BETTY WOLD JOHNSON

Mailing Address **108 EDGERSTOUNE ROAD**

City **PRINCETON** State **NJ** Zip Code **08540-6716**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371579**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CAROL JOHNSON

Mailing Address **60 CROSS RD.**

City **HOOKSETT** State **NH** Zip Code **03106-2501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **T M CRANE SERVICE, LLC** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : **SA11.368088**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HARISON JOHNSTON

Mailing Address **1588 E. DESERT GARDEN DRIVE**

City **TUCSON** State **AZ** Zip Code **85718-7833**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **612.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : **SA11.368670**

Amount of Each Receipt this Period
104.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2954.00

TOTAL This Period (last page this line number only).....

14020684310

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JAMES JOHNSON

Mailing Address **12214 BRECKNOCK STREET**

City **OAKTON** State **VA** Zip Code **22124-2345**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370442**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDOLPH JOHNSON

Mailing Address **7440 FOUNDERS WAY**

City **PONTE VEDRA BEACH** State **FL** Zip Code **32082-1914**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RJA** Occupation **HR CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369476**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARTHUR JONES

Mailing Address **15 KNIGHT AVENUE**

City **EASTHAMPTON** State **MA** Zip Code **01027-2006**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARTHUR P JONES AND ASSOCIATES, INC** Occupation **DEPUTY TAX COLLECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SA11.368738**

Amount of Each Receipt this Period
25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1125.00

14020684311

**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 160 OF 485
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	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ARTHUR JONES

Mailing Address **15 KNIGHT AVENUE**

City **EASTHAMPTON** State **MA** Zip Code **01027-2006**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARTHUR P JONES AND ASSOCIATES, INC** Occupation **DEPUTY TAX COLLECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371145**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. R. ROY JONES II

Mailing Address **9218 CALLAGHAN ROAD**

City **SAN ANTONIO** State **TX** Zip Code **78230-4517**

FEC ID number of contributing federal political committee. **C**

Name of Employer **R.W. JONES & SONS, INC.** Occupation **CONSTRUCTION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370199**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD W. JOYCE

Mailing Address **245 SCHOOL STREET**

City **WLLSVILLE** State **NY** Zip Code **14895-9479**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OTIS EASTERN SERVICE INC.** Occupation **PIPELINE CONSTRUCTION SUPERINTENDE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369746**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

14020684312

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. KAI JUEL

Mailing Address **P.O. BOX 1599**

City **MANCHESTER** State **MA** Zip Code **01944-0869**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.372060**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARJIE B. KARGMAN

Mailing Address **151 TREMONT STREET PH**

City **BOSTON** State **MA** Zip Code **02111-1101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371310**

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN G. KASNET

Mailing Address **1 UNIVERSITY LANE**

City **MANCHESTER** State **MA** Zip Code **01944-1632**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA11.371501**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

14020684313

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. MICHAEL L. KATIN

Mailing Address **9150 PENZANCE BLVD.**

City **FORT MYERS** State **FL** Zip Code **33912-1402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **21ST CENTURY ONCOLOGY, FORT MYERS,** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371396**

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM A KATTERMANN

Mailing Address **710 SALERNO WAY**

City **HOWELL** State **NJ** Zip Code **07731-1736**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : **SA11.369345**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM A KATTERMANN

Mailing Address **710 SALERNO WAY**

City **HOWELL** State **NJ** Zip Code **07731-1736**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt **08 / 19 / 2014**

Transaction ID : **SA11.371500**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

14020684314

**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 163 OF 485
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BRIAN KEANE

Mailing Address **30 NORTHRUP DRIVE**

City BRENTWOOD	State NH	Zip Code 03833-6220
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NEW YORK LIFE	Occupation FINANCIAL SERVICES
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371539**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HOWARD W. KEEGAN

Mailing Address **1029 RAY STREET**

City MANCHESTER	State NH	Zip Code 03104-1619
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.369016**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOWARD W. KEEGAN

Mailing Address **1029 RAY STREET**

City MANCHESTER	State NH	Zip Code 03104-1619
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.370032**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

14020684315

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 485
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HOWARD W. KEEGAN

Mailing Address **1029 RAY STREET**

City **MANCHESTER** State **NH** Zip Code **03104-1619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372083**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS A. KELLEHER

Mailing Address **47 KENDALL ROAD**

City **JEFFERSON** State **MA** Zip Code **01522-1001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KELLEHER & SADOWSKY ASSOCIATED, INC.** Occupation **REAL ESTATE BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372056**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES T. KELLOGG

Mailing Address **P.O. BOX 790**

City **WATERBURY** State **CT** Zip Code **06720-0790**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HUBBARD-HALL, INC.** Occupation **BUSINESS EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 07 / 2014**

Transaction ID : **SA11.370830**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

14020684316

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. KEVIN M. KELLY

Mailing Address P.O. BOX 652

City: CENTER HARBOR State: NH Zip Code: 03226-0652

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFF. Occupation: INFORMATION REQUESTED PER BEST EFF.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 20 / 2014

Transaction ID : SA11.371996

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL C. KENARY

Mailing Address 42 CHATHAM CIRCLE

City: WELLESLEY State: MA Zip Code: 02481-2805

FEC ID number of contributing federal political committee. **C**

Name of Employer: MBBC, INC. Occupation: MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 08 / 14 / 2014

Transaction ID : SA11.371241

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JAMES KENNEDY

Mailing Address 55 COLONIAL DRIVE

City: SHREWSBURY State: MA Zip Code: 01545-1545

FEC ID number of contributing federal political committee. **C**

Name of Employer: FEDERAL MEDICAL CENTER DEVENS Occupation: PSYCHIATRIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 05 / 2014

Transaction ID : SA11.367574

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

14020684317

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. JAMES KENNEDY

Mailing Address **55 COLONIAL DRIVE**

City **SHREWSBURY** State **MA** Zip Code **01545-1545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FEDERAL MEDICAL CENTER DEVENS** Occupation **PSYCHIATRIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370446**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAMES KENNEDY

Mailing Address **55 COLONIAL DRIVE**

City **SHREWSBURY** State **MA** Zip Code **01545-1545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FEDERAL MEDICAL CENTER DEVENS** Occupation **PSYCHIATRIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371848**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LESLIE M. KENNEY

Mailing Address **745 GREEN HILL BEACH ROAD**

City **WAKEFIELD** State **RI** Zip Code **02879-6226**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KENNEY MANUFACTURING, COMPANY** Occupation **MANUFACTURING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368180**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

600.00

14020684318

**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 167 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. SCOTT D. KEPNER

Mailing Address **449 WHISKEY HILL RD**

City **WOODSIDE** State **CA** Zip Code **94062-2535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VILLAGE OPERATING COMPANY, L.L.C.** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370646**

Amount of Each Receipt this Period
4000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT D. KEPNER

Mailing Address **449 WHISKEY HILL RD**

City **WOODSIDE** State **CA** Zip Code **94062-2535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VILLAGE OPERATING COMPANY, L.L.C.** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.370646B**

Amount of Each Receipt this Period
-2400.00
CONTRIBUTION
**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. SCOTT D. KEPNER

Mailing Address **449 WHISKEY HILL RD**

City **WOODSIDE** State **CA** Zip Code **94062-2535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VILLAGE OPERATING COMPANY, L.L.C.** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.373639**

Amount of Each Receipt this Period
2400.00
CONTRIBUTION
**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

14020684319

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 485
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. EDWARD KESSLER

Mailing Address **135 ROMA COURT**

City **MARINA DEL REY** State **CA** Zip Code **90292-5968**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
07 / 26 / 2014

Transaction ID : **SA11.369141**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD KESSLER

Mailing Address **135 ROMA COURT**

City **MARINA DEL REY** State **CA** Zip Code **90292-5968**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371490**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID H. KEYSTON

Mailing Address **P.O. BOX 7066**

City **CARMEL** State **CA** Zip Code **93921-7066**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368168**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

14020684320

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID H. KEYSTON

Mailing Address **P.O. BOX 7066**

City **CARMEL** State **CA** Zip Code **93921-7066**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370133**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID H. KEYSTON

Mailing Address **P.O. BOX 7066**

City **CARMEL** State **CA** Zip Code **93921-7066**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371261**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY W. KIDDER

Mailing Address **164 TWIN LAKE VILLA ROAD**

City **NEW LONDON** State **NH** Zip Code **03257-6601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2014

Transaction ID : **SA11.369147**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

1250.00

TOTAL This Period (last page this line number only).....

14020684321

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS KIMMELMAN

Mailing Address 130 OVERLEIGH ROAD

City State Zip Code
BERNARDSVILLE NJ 07924-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENERGY CAPITAL PARTNERS INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2014

Transaction ID : SA11.369146

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DOUGLAS KIMMELMAN

Mailing Address 130 OVERLEIGH ROAD

City State Zip Code
BERNARDSVILLE NJ 07924-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENERGY CAPITAL PARTNERS INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SA11.369146B

Amount of Each Receipt this Period
-1300.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS KIMMELMAN

Mailing Address 130 OVERLEIGH ROAD

City State Zip Code
BERNARDSVILLE NJ 07924-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENERGY CAPITAL PARTNERS INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SA11.373590

Amount of Each Receipt this Period
1300.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... 2600.00

TOTAL This Period (last page this line number only).....

14020684322

**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 171 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LARRY A. KING

Mailing Address **50 LIBBEY ROAD**

City **WENTWORTH** State **NH** Zip Code **03282-3419**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371984**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL S. KINGSBURY

Mailing Address **P.O. BOX 849**

City **CRESTED BUTTE** State **CO** Zip Code **81224-0849**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370412**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOEL KIRCHICK

Mailing Address **362 SOUTH ROAD**

City **WAKEFIELD** State **RI** Zip Code **02879-7611**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371766**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

1250.00

14020684323

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
SHAHIRA KNIGHT

Mailing Address **209 PENNSYLVANIA AVE**

City **FALLS CHURCH** State **VA** Zip Code **22046-3241**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **GOVERNMENT AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 28 / 2014

Transaction ID : **SA11.369269**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY J. KOLODZIEJ

Mailing Address **P.O. BOX 112**

City **MINOA** State **NY** Zip Code **13116-0112**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.370006**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LAURENCE D. KOPLAN

Mailing Address **1311 COMMONWEALTH AVENUE**

City **WEST NEWTON** State **MA** Zip Code **02465-2912**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MARLBORO FOOTWORKS LTD.** Occupation **FOOTWEAR DISTRIBUTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369584**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

14020684324

**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 173 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. THOMAS KRACZ

Mailing Address **376 WESTFORD STREET**

City **CARLISLE** State **MA** Zip Code **01741-1504**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEACHANGE INTERNATIONAL** Occupation **EXECUTIVE MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 19 / 2014

Transaction ID : **SA11.368627**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD D. KRATOVIL

Mailing Address **3300 N. VERMONT STREET**

City **ARLINGTON** State **VA** Zip Code **22207-4469**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369510**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY R. KRAVIS

Mailing Address **9 WEST 57TH STREET
SUITE 4200**

City **NEW YORK** State **NY** Zip Code **10019-2701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KOHLBERG, KRAVIS, ROBERTS & COMPANY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : **SA11.370824**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

14020684325

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HENRY R. KRAVIS

Mailing Address **9 WEST 57TH STREET**
SUITE 4200

City **NEW YORK** State **NY** Zip Code **10019-2701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KOHLBERG, KRAVIS, ROBERTS & COMPANY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.370824B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. HENRY R. KRAVIS

Mailing Address **9 WEST 57TH STREET**
SUITE 4200

City **NEW YORK** State **NY** Zip Code **10019-2701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KOHLBERG, KRAVIS, ROBERTS & COMPANY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.373641**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MS. MARIE-JOSEE KRAVIS

Mailing Address **625 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10065-6545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ECONOMIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370828**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

14020684326

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. MARIE-JOSEE KRAVIS

Mailing Address **625 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10065-6545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ECONOMIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.370828B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
MS. MARIE-JOSEE KRAVIS

Mailing Address **625 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10065-6545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ECONOMIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.373643**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
MR. BRADLEY R. KREICK

Mailing Address **53 INDIAN ROCK ROAD**

City **NASHUA** State **NH** Zip Code **03063-1322**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371776**

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

14020684327

**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 176 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT L. KRIEDLER

Mailing Address **P.O. BOX 6464**

City **CINCINNATI** State **OH** Zip Code **45201-6464**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371346**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JASON P. KROLL

Mailing Address **9 BOATCLUB DRIVE**

City **STRATHAM** State **NH** Zip Code **03885-2356**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BANK W HOLDINGS** Occupation **MANAGING PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371979**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID KROWITZ

Mailing Address **179 SALEM ST.**

City **READING** State **MA** Zip Code **01867-2665**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NUANCE COMMUNICATIONS, INC.** Occupation **SOFTWARE ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
07 / 29 / 2014

Transaction ID : **SA11.369297**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1600.00

14020684328

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. JANE G. KUCKS

Mailing Address P.O. BOX 1386

City EAST ORLEANS State MA Zip Code 02643-1386

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 400.00

Date of Receipt
 MM / DD / YYYY
 08 / 08 / 2014

Transaction ID : SA11.370875

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROGER KUFKER

Mailing Address 11 VALLEY RD

City WELLESLEY State MA Zip Code 02481-1456

FEC ID number of contributing federal political committee. **C**

Name of Employer TA ASSOCIATES Occupation VENTURE CAPITALIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
 MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : SA11.368601

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION
 IN-KIND: CATERING

C. Full Name (Last, First, Middle Initial)
WILLIAM KUNKLER

Mailing Address 1500 NORTH LAKE SHORE DR. #23A

City CHICAGO State IL Zip Code 60610-6686

FEC ID number of contributing federal political committee. **C**

Name of Employer C.C. INDUSTRIES, INC. Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 MM / DD / YYYY
 07 / 09 / 2014

Transaction ID : SA11.368027

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 4700.00

TOTAL This Period (last page this line number only).....

14020684329

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JAMES A. LA VEA

Mailing Address **2579 SPANISH RIVER ROAD**

City **BOCA RATON** State **FL** Zip Code **33432-8130**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371238**

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FREDERICK W. LACY

Mailing Address **20 CHUCKWAGON ROAD**

City **ROLLING HILLS** State **CA** Zip Code **90274-5276**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LACY OIL TOOL COMPANY** Occupation **OWNER/C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369423**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HARRIETT LAKE

Mailing Address **210 RIVER BEND CT**

City **LONGWOOD** State **FL** Zip Code **32779-4918**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA11.368521**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

14020684330

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 OF 485
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. SUZANNE A. LAKE

Mailing Address **389 S. LAKE DRIVE**

City **PALM BEACH** State **FL** Zip Code **33480-4567**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368791**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY E. LAMBERT

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371791**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LORI KELLER LAMBERT

Mailing Address **32 COLUMBIA AVENUE**

City **NASHUA** State **NH** Zip Code **03064-1601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371777**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684331

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER LANE

Mailing Address **29 FARM STREET**

City **MEDFIELD** State **MA** Zip Code **02052-1118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KERIVAN-LANE, INC.** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : **SA11.367733**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JANE LANE

Mailing Address **15 RUSSELL STREET**

City **KEENE** State **NH** Zip Code **03431-2342**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LANE & BENTLEY, P.C.** Occupation **SECRETARY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : **SA11.369114**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK W. LANGEVIN

Mailing Address **25 BOWDITCH DRIVE**

City **SHREWSBURY** State **MA** Zip Code **01545-1704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PHOENIX COMMUNICATIONS, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 01 / 2014

Transaction ID : **SA11.373707**

Amount of Each Receipt this Period
-1000.00
 CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....

-650.00

TOTAL This Period (last page this line number only).....

14020684332

**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 181 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PETER A. LARKIN

Mailing Address **3932 ARBORWAY**

City **CHARLOTTE** State **NC** Zip Code **28211-3802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNC CHARLOTTE** Occupation **ADJUNCT INSTRUCTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371232**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS D. LASERSON

Mailing Address **304 NORTH AVENUE**

City **WESTPORT** State **CT** Zip Code **06880-1328**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371431**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LOUIS E. LATAIF

Mailing Address **4000 ARROWWOOD COURT**

City **BONITA SPRINGS** State **FL** Zip Code **34134-0754**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : **SA11.367717**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

14020684333

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 182 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LOUIS E. LATAIF

Mailing Address **4000 ARROWWOOD COURT**

City **BONITA SPRINGS** State **FL** Zip Code **34134-0754**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.370066**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PETER W. LAWRENCE

Mailing Address **5 BOND STREET**

City **PORTLAND** State **ME** Zip Code **04102-3908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371277**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT A. LAWRENCE

Mailing Address **10 LONGWOOD DRIVE UNIT 124**

City **WESTWOOD** State **MA** Zip Code **02090-1131**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
07 / 09 / 2014

Transaction ID : **SA11.368029**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **850.00**

TOTAL This Period (last page this line number only).....

14020684334

**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)

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD M. LEACH

Mailing Address **P.O. BOX 1888**

City **NEW LONDON** State **NH** Zip Code **03257-1888**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371971**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID S. LEE

Mailing Address **27 LAUREL ROAD**

City **CHESTNUT HILL** State **MA** Zip Code **02467-2202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371399**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK D. LEINER

Mailing Address **7009 COASTAL HIGHWAY**

City **OCEAN CITY** State **MD** Zip Code **21842-2927**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BONFIRE REST. OCEAN CITY MARYLAND** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371336**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1050.00

14020684335

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ARTO LEINO

Mailing Address **410 MAIN STREET**

City **KEENE** State **NH** Zip Code **03431-4180**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369539**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERALD J. LETENDRE

Mailing Address **4 W. WIND DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-5610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DIAMOND CASTING & MACHINE** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370425**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES E. LEWIS

Mailing Address **2416 COUNTRY CLUB DRIVE**

City **LYNN HAVEN** State **FL** Zip Code **32444-1996**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368191**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

14020684336

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. THANASI C. LIAKOS

Mailing Address **1 1/2 LAMB ROAD**

City **NASHUA** State **NH** Zip Code **03062-2201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIAKOS COMPANIES** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371819**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
H. W. LICHTENBERGER

Mailing Address **508 NW WINTERS CREEK ROAD**

City **PALM CITY** State **FL** Zip Code **34990-8096**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371237**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE L. LINDEMANN

Mailing Address **1565 NORTH OCEAN WAY**

City **PALM BEACH** State **FL** Zip Code **33480-3050**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371814**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

14020684337

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CLARK N. LINDLEY

Mailing Address **490 PUMPKIN HILL ROAD**

City **WARNER** State **NH** Zip Code **03278-4521**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WILSON INSURANCE AGENCY** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371970**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY A. LION

Mailing Address **7089 N. VAN NESS BLVD.**

City **FRESNO** State **CA** Zip Code **93711-7169**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SA11.371063**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID J. LIONETT

Mailing Address **11157 SIERRA PALM COURT**

City **FORT MYERS** State **FL** Zip Code **33966-5754**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N.M.F.N.** Occupation **FINANCIAL REPRESENTATIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371183**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

14020684338

**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 187 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID J. LIONETT

Mailing Address **11157 SIERRA PALM COURT**

City **FORT MYERS** State **FL** Zip Code **33966-5754**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N.M.F.N.** Occupation **FINANCIAL REPRESENTATIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371184**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SUZANNE HEINTZ LIPSEY

Mailing Address **P.O. BOX 7795**

City **AVON** State **CO** Zip Code **81620-7795**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369596**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL LIVANOS

Mailing Address **190 EAST 72ND ST**

City **NEW YORK** State **NY** Zip Code **10021-4370**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCIO SHIPPING, INC.** Occupation **SHIPBROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 MM / DD / YYYY
08 / 17 / 2014

Transaction ID : **SA11.371478**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **450.00**

TOTAL This Period (last page this line number only).....

14020684339

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GEORGE C. LOGAN

Mailing Address **78 FOREST RIDGE ROAD**
UNIT 202

City **CONCORD** State **MA** Zip Code **01742-3840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371252**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT LOGSDON

Mailing Address **23 NUTTINGHAM RD.**

City **WINDHAM** State **NH** Zip Code **03087-1101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CARESTREAM DENTAL, LLC** Occupation **SALES MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : **SA11.368683**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION
 IN-KIND: CATERING

C. Full Name (Last, First, Middle Initial)
MS. MARY M. LONG

Mailing Address **79 YORK ROAD**

City **MANSFIELD** State **MA** Zip Code **02048-1760**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371763**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

14020684340

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ZOFIA LONG

Mailing Address **4 PRESERVE DRIVE**

City **NASHUA** State **NH** Zip Code **03064-8107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIFE CARE CENTERS OF AMERICA** Occupation **VICE PRESIDENT HEALTHCARE OPERATIO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371802**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. LOOMIS

Mailing Address **11 SHEFFIELD ROAD**

City **PORTSMOUTH** State **NH** Zip Code **03801-4837**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.369025**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. VINCENT G. LOPORCHIO

Mailing Address **10 BELLE ISLE WAY**

City **ANDOVER** State **MA** Zip Code **01810-2436**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **SENIOR VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370219**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1450.00

14020684341

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. R. BLAKE LOVE

Mailing Address **11 BOXWOOD ROAD**

City **BEDFORD** State **NH** Zip Code **03110-5703**

FEC ID number of contributing federal political committee. **C**

Name of Employer **U.B.S.** Occupation **FINANCIAL CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371822**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LYNDA LOWNEY

Mailing Address **2 RIDGEWOOD DRIVE**

City **AMHERST** State **NH** Zip Code **03031-2008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371780**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD A. LOZICK

Mailing Address **29425 CHAGRIN BLVD. STE. 201**

City **CLEVELAND** State **OH** Zip Code **44122-4602**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SWAGELOK COMPANY** Occupation **CHAIRMAN OF THE BOARD**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371320**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

14020684342

**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 191 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HARRY LUCAS JR.

Mailing Address 327 CONGRESS AVE. STE. 500

City AUSTIN	State TX	Zip Code 78701-3656
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LUCAS PETROLEUM, INC.	Occupation CHAIRMAN & C.E.O.
--	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371302**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. LETTY LUTZKER

Mailing Address 408 SOUTH 2ND STREET

City BANGOR	State PA	Zip Code 18013-2514
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FEC ID number of contributing federal political committee. **C**

Name of Employer IMAGING CONSULTANTS OF ESSEX	Occupation PHYSICIAN
---	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369447**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD P. LYDON

Mailing Address 12 PEMBERTON ROAD

City NASHUA	State NH	Zip Code 03063-2915
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.371991**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

14020684343

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. MACALPINE

Mailing Address **277 LOCUST STREET**
SUITE A.

City **DOVER** State **NH** Zip Code **03820-4009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ORCHARA MANAGEMENT INC.** Occupation **ACCOUNTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370220**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LANNING MACFARLAND JR.

Mailing Address **415 N. STATE STREET**

City **CHICAGO** State **IL** Zip Code **60654-4607**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369642**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS P. MADDOX

Mailing Address **76 JOPPA HILL ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4632**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MADDOX INVESTMENT PROPERTIES** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371820**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684344

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
THOMAS MADDUX

Mailing Address **102 W PENNSYLVANIA AVE**

City **TOWSON** State **MD** Zip Code **21204-4526**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SA11.367180**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CONSTANCE C. MADSEN

Mailing Address **2493 E. FIELD ROSE DRIVE**

City **HOLLADAY** State **UT** Zip Code **84121-1571**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368153**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CONSTANCE C. MADSEN

Mailing Address **2493 E. FIELD ROSE DRIVE**

City **HOLLADAY** State **UT** Zip Code **84121-1571**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371254**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

14020684345

**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 194 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JAMES MAGEE

Mailing Address **888 BOULEVARD OF THE ARTS**

City **SARASOTA** State **FL** Zip Code **34236-4871**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : **SA11.368620**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANET MAHFUZ

Mailing Address **3 DUCK POND LANE**

City **MERRIMACK** State **NH** Zip Code **03054-4834**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371783**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE MAHONEY

Mailing Address **4417 BELKNAP ROAD**

City **CHARLOTTE** State **NC** Zip Code **28211-3828**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : **SA11.370985**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684346

**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 195 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GAVIN P. MALOOF

Mailing Address **P.O. BOX 30428**

City **LAS VEGAS** State **NV** Zip Code **89173-0428**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369263**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE J. MALOOF

Mailing Address **P.O. BOX 30428**

City **LAS VEGAS** State **NV** Zip Code **89173-0428**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369264**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH J. MALOOF

Mailing Address **P.O. BOX 30428**

City **LAS VEGAS** State **NV** Zip Code **89173-0428**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369262**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **7800.00**

TOTAL This Period (last page this line number only).....

14020684347

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PHILLIP J. MALOOF

Mailing Address **P.O. BOX 30428**

City **LAS VEGAS** State **NV** Zip Code **89173-0428**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369261**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SYLVIA A. MANLEY

Mailing Address **5 LOON LAKE ROAD**

City **FREEDOM** State **NH** Zip Code **03836-4911**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368797**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANCIS MARCHILENA

Mailing Address **40B NUTTING ROAD**

City **WESTFORD** State **MA** Zip Code **01886-1336**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369129**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2950.00

14020684348

**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 197 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LOUIS J. MARETT

Mailing Address **32 SHADY HILL ROAD**

City **WESTON** State **MA** Zip Code **02493-1408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHOATE HALL & STEWART LLP** Occupation **LAWYER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 05 / 2014**

Transaction ID : **SA11.370122**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARIA R. MARGOLIS

Mailing Address **37 BUCKINGHAM WAY**

City **BEDFORD** State **NH** Zip Code **03110-4233**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : **SA11.371794**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL MARIX

Mailing Address **42575 MELANIE PL, STE S**

City **PALM DESERT** State **CA** Zip Code **92211-5162**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 15 / 2014**

Transaction ID : **SA11.368369**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

14020684349

**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 198 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MICHAEL MARIX

Mailing Address **42575 MELANIE PL, STE S**

City **PALM DESERT** State **CA** Zip Code **92211-5162**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 29 / 2014

Transaction ID : **SA11.369306**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS F. MARKEY

Mailing Address **360 STATE ROUTE 286**

City **SEABROOK** State **NH** Zip Code **03874-4649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MARKEY'S LOBSTER POUND** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370225**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS F. MARKEY

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371760**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

14020684350

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER MAROUN

Mailing Address **217 LEE ROAD**

City **MOULTONBORO** State **NH** Zip Code **03254-3813**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MIRACLE FARMS** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368720**

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN F. MARSHALL

Mailing Address **136 MOORINGS PARK DRIVE
APARTMENT 502**

City **NAPLES** State **FL** Zip Code **34105-2998**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369723**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY LOU MARSTON

Mailing Address **2 POND PATH**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2243**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : **SA11.372103**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1800.00**

TOTAL This Period (last page this line number only).....

14020684351

**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 200 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY MARTINEZ

Mailing Address **4 LOIKO DRIVE**

City **NASHUA** State **NH** Zip Code **03062-2296**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371784**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL MARTINO

Mailing Address **329 MARIOMI RD**

City **NEW CANAAN** State **CT** Zip Code **06840-3318**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MASON CAPITAL** Occupation **ANALYST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.369822**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DONNA MARX

Mailing Address **11 FIELDSTONE DRIVE**

City **HOOKSETT** State **NH** Zip Code **03106-1222**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CARBON POWER ASSOCIATES** Occupation **FOOT MODEL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371301**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3100.00**

TOTAL This Period (last page this line number only).....

14020684352

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
MR. PETER D. MARX

Mailing Address **11 FIELDSTONE DRIVE**

City State Zip Code
HOOKSETT NH 03106-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARBON POWER ASSOCIATES HAND MODEL

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371311**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
BERYL MASENG

Mailing Address **9 WINN ROAD**

City State Zip Code
NASHUA NH 03062-1714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VIKING CONTROLS BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371818**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. ERIK MASENG

Mailing Address **9 WINN ROAD**

City State Zip Code
NASHUA NH 03062-1714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VIKING CONTROLS ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371826**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

750.00

TOTAL This Period (last page this line number only).....

14020684353

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. J. J. MATTHEWS

Mailing Address **P.O. BOX 176**

City **ABILENE** State **TX** Zip Code **79604-0176**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MATTHEWS OFC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368172**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK MAURAN

Mailing Address **22 PARSONAGE STREET**

City **PROVIDENCE** State **RI** Zip Code **02903-4732**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PUBLISHING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369378**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RON MAY

Mailing Address **2536 RIMROCK AVENUE**

City **GRAND JUNCTION** State **CO** Zip Code **81505-8669**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368724**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

14020684354

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ALLAN C. MAYER

Mailing Address 23005 N. 74TH STREET UNIT 4036

City State Zip Code
SCOTTSDALE AZ 85255-7521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SA11.369898

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE L. MAYER

Mailing Address 2 ANDREWS ROAD

City State Zip Code
ESSEX CT 06426-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MANHATTAN REALTY GROUP REAL ESTATE MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SA11.370134

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN MAYER JR.

Mailing Address 7 UPLAND DRIVE

City State Zip Code
GREENWICH CT 06831-4423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : SA11.368520

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

14020684355

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. THOMAS J. MAZZETTA

Mailing Address **1990 SAINT JOHN AVENUE**

City **HIGHLAND PARK** State **IL** Zip Code **60035-3103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MAZZETTA COMPANY LLC** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368554**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD C. MCCARTHY

Mailing Address **1318 CANTERBURY ROAD**

City **RALEIGH** State **NC** Zip Code **27608-1902**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RIVER CITIES CAPITAL FUNDS** Occupation **FUND MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : **SA11.371596**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY MCCARROLL

Mailing Address **4525 S ATLANTIC AVENUE
UNIT 1606**

City **PONCE INLET** State **FL** Zip Code **32127-7059**

FEC ID number of contributing federal political committee. **C**

Name of Employer **USAIRWAYS** Occupation **PILOT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **07 / 15 / 2014**

Transaction ID : **SA11.368372**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1350.00**

TOTAL This Period (last page this line number only).....

14020684356

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
WILKES MCCLAVE

Mailing Address **767 RIVER ROAD**

City **LYME** State **NH** Zip Code **03768-3018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA11.369275**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILKES MCCLAVE

Mailing Address **767 RIVER ROAD**

City **LYME** State **NH** Zip Code **03768-3018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 16 / 2014**

Transaction ID : **SA11.369275B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
WILKES MCCLAVE

Mailing Address **767 RIVER ROAD**

City **LYME** State **NH** Zip Code **03768-3018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 16 / 2014**

Transaction ID : **SA11.373592**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

SUBTOTAL of Receipts This Page (optional)..... **5200.00**

TOTAL This Period (last page this line number only).....

14020684357

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 206 OF 485
	(check only one)	
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<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM M. MCDERMOTT

Mailing Address **174 QUEEN STREET, UNIT 3A**

City **FALMOUTH** State **MA** Zip Code **02540-3222**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1400.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370808**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. PATRICIA MCELHONE

Mailing Address **32 WASHINGTON SQUARE WEST**

City **NEW YORK** State **NY** Zip Code **10011-9217**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368128**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE R. MCFARLIN

Mailing Address **P.O. BOX 702821**

City **TULSA** State **OK** Zip Code **74170-2821**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **599.50**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370776**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

14020684358

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BRIAN J. MCGINLEY

Mailing Address **635 BELLE TERRE ROAD**

City **PORT JEFFERSON** State **NY** Zip Code **11777-1935**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LONG ISLAND BONE & JOINT** Occupation **ORTHOPAEDIC SURGEON**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368689**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERALD F. MCGOVERN

Mailing Address **40 LAKE SHORE ROAD**

City **BRIGHTON** State **MA** Zip Code **02135-6391**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370285**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWIN D. MCGUIRE

Mailing Address

City **NORTH CONWAY** State **NH** Zip Code **03860-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt **08 / 13 / 2014**

Transaction ID : **SA11.371126**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

1400.00

14020684359

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RAYMOND P. MCKEON

Mailing Address **16 LEDGEWOOD HILLS DRIVE**
APARTMENT 307

City **NASHUA** State **NH** Zip Code **03062-4452**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368808**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND P. MCKEON

Mailing Address **16 LEDGEWOOD HILLS DRIVE**
APARTMENT 307

City **NASHUA** State **NH** Zip Code **03062-4452**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370274**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT F. MCKEON

Mailing Address **18557 SE FERLAND COURT**

City **TEQUESTA** State **FL** Zip Code **33469-1775**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BCM MANAGEMENT INC.** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.372021**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

600.00

14020684360

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT A. MCKITTRICK

Mailing Address **55 KENT LANE**
APARTMENT H317

City **NASHUA** State **NH** Zip Code **03062-2818**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA11.371048**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUSTY MCLEAR

Mailing Address **312 DANIEL WEBSTER HIGHWAY**

City **MEREDITH** State **NH** Zip Code **03253-5863**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAMPSHIRE HOSPITALITY HOLDINGS, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371157**

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM MCLIMANS

Mailing Address **425 SHIPPEE ROAD**

City **EAST GREENWICH** State **RI** Zip Code **02818-1044**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY** Occupation **SUPERVISOR CASH MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370826**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

CONTRIBUTION

14020684361

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: (check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. TERRANCE MCMAHON

Mailing Address **73 WENDOVER WAY**

City **BEDFORD** State **NH** Zip Code **03110-6056**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFC Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370239**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TERRANCE MCMAHON

Mailing Address **73 WENDOVER WAY**

City **BEDFORD** State **NH** Zip Code **03110-6056**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFC Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.370239B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. TERRANCE MCMAHON

Mailing Address **73 WENDOVER WAY**

City **BEDFORD** State **NH** Zip Code **03110-6056**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFC Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373629**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

5200.00

14020684362

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 211 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. VINCENT MCMAHON

Mailing Address **14 HURLINGHAM DRIVE**

City **GREENWICH** State **CT** Zip Code **06831-2739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **W.W.E.** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 14 / 2014

Transaction ID : **SA11.368362**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VINCENT MCMAHON

Mailing Address **14 HURLINGHAM DRIVE**

City **GREENWICH** State **CT** Zip Code **06831-2739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **W.W.E.** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.368362B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. VINCENT MCMAHON

Mailing Address **14 HURLINGHAM DRIVE**

City **GREENWICH** State **CT** Zip Code **06831-2739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **W.W.E.** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373558**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

14020684363

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 212 OF 485		
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ROBERT MCNICHOLS

Mailing Address **3333 PETERS CREEK RD NW**

City **ROANOKE** State **VA** Zip Code **24019-2719**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CSM, INC.** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 15 / 2014**

Transaction ID : **SA11.371240**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANCIS X. MEANEY

Mailing Address **45 BITTERSWEET LANE**

City **NORTH CHATHAM** State **MA** Zip Code **02650-1001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MINTZ LEVIN** Occupation **LAWYER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369513**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY MELLON

Mailing Address **P.O. BOX 1500**

City **SARATOGA** State **WY** Zip Code **82331-1500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **TRANSPORTATION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 15 / 2014**

Transaction ID : **SA11.371463**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5700.00**

TOTAL This Period (last page this line number only).....

14020684364

**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 213 OF 485
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	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. TIMOTHY MELLON

Mailing Address P.O. BOX 1500

City: SARATOGA State: WY Zip Code: 82331-1500

FEC ID number of contributing federal political committee: **C**

Name of Employer: SELF-EMPLOYED Occupation: TRANSPORTATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 08 / 19 / 2014

Transaction ID : SA11.371463B

Amount of Each Receipt this Period: -2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY MELLON

Mailing Address P.O. BOX 1500

City: SARATOGA State: WY Zip Code: 82331-1500

FEC ID number of contributing federal political committee: **C**

Name of Employer: SELF-EMPLOYED Occupation: TRANSPORTATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 08 / 19 / 2014

Transaction ID : SA11.373652

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. ROBERT L. MERCER

Mailing Address 600 ROUTE 25A

City: EAST SETAUKET State: NY Zip Code: 11733-1235

FEC ID number of contributing federal political committee: **C**

Name of Employer: RENAISSANCE TECH Occupation: FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 08 / 04 / 2014

Transaction ID : SA11.370143

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

14020684365

**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 214 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HENRY H. MEYER JR.

Mailing Address **P.O. BOX 149**

City **WAKEFIELD** State **RI** Zip Code **02880-0149**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370353**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PETER MEYER

Mailing Address **921 ORCHID POINT WAY**

City **VERO BEACH** State **FL** Zip Code **32963-9518**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368701**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN C. MEYERS

Mailing Address **398 MOUNTAIN ROAD**

City **JAFFREY** State **NH** Zip Code **03452-5933**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCM ASSOCIATES** Occupation **BUSINESS OWNER/PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369503**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

1500.00

14020684366

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 215 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. EDWARD C. MICHAUD

Mailing Address **12 HIGHLAND STREET**

City **WESTON** State **MA** Zip Code **02493-1110**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ORTHODONTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369986**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DONALD MIELCAREK

Mailing Address **500 UPPER CONWAY CIRCLE**

City **CHESTERFIELD** State **MO** Zip Code **63017-2083**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369747**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL MILBURY

Mailing Address **21 BEAVER PLACE**

City **BOSTON** State **MA** Zip Code **02108-3303**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371141**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

14020684367

**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)

11a 11b 11c 11d 12 13a 13b 14 15

PAGE 216 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID K. MILLER

Mailing Address **10347 ALHAMBRA STREET**

City **OVERLAND PARK** State **KS** Zip Code **66207-4017**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 08 / 2014**

Transaction ID : **SA11.371018**

Amount of Each Receipt this Period **300.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFF MILNE

Mailing Address **P.O. BOX 204**

City **NEW LONDON** State **NH** Zip Code **03257-0204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.371966**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JI MIN

Mailing Address **3 LEONARD ROAD**

City **BRONXVILLE** State **NY** Zip Code **10708-1606**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CITIBANK HK** Occupation **BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 15 / 2014**

Transaction ID : **SA11.368396**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **1800.00**

TOTAL This Period (last page this line number only)

14020684368

**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)

11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. NORMAN R. MINOR

Mailing Address **212 PUTNAM HILL ROAD**

City **SUTTON** State **MA** Zip Code **01590-1117**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOUCHSTONE CONSULTING GROUP** Occupation **LAWYER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : SA11.371865

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN MITCHELL

Mailing Address **250 EAST 54TH ST**

City **NEW YORK** State **NY** Zip Code **10022-4810**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 10 / 2014**

Transaction ID : SA11.368085

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY P. MOCK

Mailing Address **P.O. BOX 237**

City **JACKSON** State **NH** Zip Code **03846-0237**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : SA11.368972

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

14020684369

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 485
(check only one)

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HENRY P. MOCK

Mailing Address **P.O. BOX 237**

City **JACKSON** State **NH** Zip Code **03846-0237**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370297**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN MOONEY-CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.373478**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN MOONEY-CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.373478B**

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5250.00

14020684370

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 219 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN MOONEY-CAHILL

Mailing Address **775 HIGH STREET**

City **DEDHAM** State **MA** Zip Code **02026-4113**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.373480**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MS. MAUREEN C. MOONEY

Mailing Address **P.O. BOX 1676**

City **MERRIMACK** State **NH** Zip Code **03054-1676**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : **SA11.371754**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LIZ MOORE

Mailing Address **25 HOLLY LANE #2B**

City **CHESTNUT HILL** State **MA** Zip Code **02467-2156**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 01 / 2014**

Transaction ID : **SA11.367202**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **500.00**

TOTAL This Period (last page this line number only).....

14020684371

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LOUIS T. MOORE

Mailing Address **20 HALFMOON**

City **IRVINE** State **CA** Zip Code **92614-5433**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **MORTGAGE BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371409**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL MORAN

Mailing Address **50 CEDAR CREST LANE**

City **AUBURN** State **NH** Zip Code **03032-3989**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369410**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP S. MORAN JR.

Mailing Address **15 GREYSTONE ROAD**

City **LARCHMONT** State **NY** Zip Code **10538-1415**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PIERCE, FENNER & SMITH** Occupation **FINANCIAL ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371746**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1750.00

14020684372

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 221 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. FRANK J. MORGAN

Mailing Address **3000 GARLANDS LANE**
UNIT 3311

City **BARRINGTON** State **IL** Zip Code **60010-6847**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369750**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN J. MORIARTY

Mailing Address **25 PROSPECT STREET**

City **WINCHESTER** State **MA** Zip Code **01890-3134**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOHN MORIARTY & ASSOCIATES, INC.** Occupation **C.E.O./BUILDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : **SA11.368920**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN J. MORIARTY

Mailing Address **25 PROSPECT STREET**

City **WINCHESTER** State **MA** Zip Code **01890-3134**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOHN MORIARTY & ASSOCIATES, INC.** Occupation **C.E.O./BUILDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA11.368920B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional)..... **5450.00**

TOTAL This Period (last page this line number only).....

14020684373

**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)

11a 11b 11c 11d 11e
 12 13a 13b 14 15

PAGE 222 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN J. MORIARTY

Mailing Address **25 PROSPECT STREET**

City **WINCHESTER** State **MA** Zip Code **01890-3134**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOHN MORIARTY & ASSOCIATES, INC.** Occupation **C.E.O./BUILDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373586**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. CALVIN MORSE

Mailing Address **6761 VALLON DRIVE APT. A209**

City **RANCHO PALOS VERDES** State **CA** Zip Code **90275-5358**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371235**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES A. MORSE

Mailing Address **7101 BAY FRONT DRIVE APT. 422**

City **ANNAPOLIS** State **MD** Zip Code **21403-3702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369916**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

14020684374

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 223 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROGER MOSER

Mailing Address **P.O. BOX 668**

City **FULTON** State **MO** Zip Code **65251-0668**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369537**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. MOSHOFSKY

Mailing Address **10585 S.W. 161ST COURT**

City **BEAVERTON** State **OR** Zip Code **97007-8171**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1400.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369546**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KIM MOSLEY

Mailing Address **4 LITCH COMMON COURT**

City **AMHERST** State **NH** Zip Code **03031-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : **SA11.369461**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

14020684375

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY J. MOULTON

Mailing Address **27 NIBLICK LANE**

City **GREENLAND** State **NH** Zip Code **03840-2623**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371990**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TOM MOULTON

Mailing Address **702 SOUTH ROAD**

City **RYE** State **NH** Zip Code **03870-2518**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SLEEPNET CORPORATION** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371531**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DIANE MUELLER

Mailing Address **52 SHORE DRIVE**

City **NEWBURY** State **NH** Zip Code **03255-5938**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RESORT ASSET MANAGEMENT, INC.** Occupation **RESORT MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368126**

Amount of Each Receipt this Period
1300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **4150.00**

TOTAL This Period (last page this line number only)

14020684376

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. JOANE R. MUELLER-LONDON

Mailing Address **27 KENWOOD ROAD**

City **WETHERSFIELD** State **CT** Zip Code **06109-2336**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LONDON & LONDON** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370788**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIM MUELLER

Mailing Address **52 SHORE DRIVE**

City **NEWBURY** State **NH** Zip Code **03255-5938**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RESORT ASSET MANAGEMENT, INC.** Occupation **RESORT MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt **07 / 11 / 2014**

Transaction ID : **SA11.368127**

Amount of Each Receipt this Period
1300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SAM C. MURDOUGH

Mailing Address **P.O. BOX 153**

City **CENTER HARBOR** State **NH** Zip Code **03226-0153**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 01 / 2014**

Transaction ID : **SA11.370063**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

14020684377

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT S. MURLEY

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFO REQUESTED PER BEST EFF** Occupation **INFO REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371757**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT S. MURLEY

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFO REQUESTED PER BEST EFF** Occupation **INFO REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.371757B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. ROBERT S. MURLEY

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFO REQUESTED PER BEST EFF** Occupation **INFO REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373659**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

5200.00

14020684378

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. MARY MURPHY

Mailing Address **46 CENTRAL DRIVE**

City **MANHASSET** State **NY** Zip Code **11030-1450**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368960**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY MURPHY

Mailing Address **46 CENTRAL DRIVE**

City **MANHASSET** State **NY** Zip Code **11030-1450**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368962**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL E. MURPHY

Mailing Address **6345 BALBOA BLVD.
SUITE 375**

City **ENCINO** State **CA** Zip Code **91316-5238**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SINGER BURKE ZIMMER & BUTLER LLP** Occupation **POLITICAL CONSULTANT/WRITER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368594**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684379

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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PAGE 228 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL E. MURPHY

Mailing Address **6345 BALBOA BLVD.
SUITE 375**

City **ENCINO** State **CA** Zip Code **91316-5238**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SINGER BURKE ZIMMER & BUTLER LLP** Occupation **POLITICAL CONSULTANT/WRITER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368779**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. PATSY A. MURPHY

Mailing Address **4 JOHN STARK LANE**

City **HAMPTON** State **NH** Zip Code **03842-1026**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370370**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE M. MURRAY

Mailing Address **370 N. MAYFLOWER ROAD**

City **LAKE FOREST** State **IL** Zip Code **60045-2324**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369673**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

14020684380

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH R. MURRAY

Mailing Address **19 COLONEL DANIELS DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-5010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FMR, LLC** Occupation **VICE PRESIDENT OF PUBLIC AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369840**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEPHEN NANNIS

Mailing Address **16095 VIA MONTEVERDE**

City **DELRAY BEACH** State **FL** Zip Code **33446-2352**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 22 / 2014

Transaction ID : **SA11.368640**

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER S. NAPOLI

Mailing Address **6 PAGE ROAD**

City **LEXINGTON** State **MA** Zip Code **02420-2606**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368781**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

14020684381

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 230 OF 485
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD T. NASTI

Mailing Address **42 WOODLAWN AVENUE**

City **NEW ROCHELLE** State **NY** Zip Code **10804-4619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **H.J. KALIKOW** Occupation **SR. VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371803**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. CHARLES D. NEAL

Mailing Address **65 PERRY ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4525**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371781**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JASON C. NEAL

Mailing Address **18610 ROSLYN SPRINGS DRIVE**

City **SPRING** State **TX** Zip Code **77388-1402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369329**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1650.00**

TOTAL This Period (last page this line number only).....

14020684382

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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Detailed Summary Page

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. OWEN D. NEE JR.

Mailing Address **701 FOREST AVENUE**

City State Zip Code
RYE NY 10580-3261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GREENBERG TRAUIG L.L.P. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.372036**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. THERESA A. NEGRON

Mailing Address **28 TANGLEWOOD DRIVE**

City State Zip Code
NASHUA NH 03062-1044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371774**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
J DAVID NEHER

Mailing Address **C/O L.J. NURSING & REHAB**

City State Zip Code
LA JOLLA CA 92037-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371834**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

14020684383

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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Detailed Summary Page

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. JOHN DAVID NEHER
Mailing Address **2087 HOTEL CIRCLE SOUTH**
City **SAN DIEGO** State **CA** Zip Code **92108-3313**
FEC ID number of contributing federal political committee. **C**
Name of Employer **RETIRED** Occupation **RETIRED**
Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
MM / DD / YYYY
08 / 06 / 2014
Transaction ID : **SA11.370449**
Amount of Each Receipt this Period
500.00
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. FREDERICK N. NELSON JR.
Mailing Address **74 FULLER POND ROAD #176**
City **MIDDLETON** State **MA** Zip Code **01949-2508**
FEC ID number of contributing federal political committee. **C**
Name of Employer **RETIRED** Occupation **RETIRED**
Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014
Transaction ID : **SA11.370329**
Amount of Each Receipt this Period
100.00
CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. FREDERICK N. NELSON JR.
Mailing Address **74 FULLER POND ROAD #176**
City **MIDDLETON** State **MA** Zip Code **01949-2508**
FEC ID number of contributing federal political committee. **C**
Name of Employer **RETIRED** Occupation **RETIRED**
Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014
Transaction ID : **SA11.372081**
Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

700.00
700.00

14020684384

**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) 11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. PHYLLIS W. NICHOLAS

Mailing Address **40 HOWARD ROAD**

City **GREENWICH** State **CT** Zip Code **06831-3104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **07 / 08 / 2014**

Transaction ID : **SA11.367679**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON NICKLES

Mailing Address **903 CENTRILLION DRIVE**

City **MCLEAN** State **VA** Zip Code **22102-1443**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NICKLES GROUP** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 08 / 2014**

Transaction ID : **SA11.371023**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLIFFORD M. NOREEN

Mailing Address **95 BENT TREE DRIVE**

City **EAST LONGMEADOW** State **MA** Zip Code **01028-1365**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BABSON CAPITAL MANAGEMENT, L.L.C** Occupation **INVESTMENT PROFESSIONAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : **SA11.371825**

Amount of Each Receipt this Period
750.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1950.00

14020684385

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ELLEN M. NOREEN

Mailing Address **95 BENT TREE DRIVE**

City **EAST LONGMEADOW** State **MA** Zip Code **01028-1365**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371804**

Amount of Each Receipt this Period
750.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT C. O'BRIEN

Mailing Address **535 E. 86TH STREET**
APARTMENT 20D

City **NEW YORK** State **NY** Zip Code **10028-7533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GLOBAL PARTNERS** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371641**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID P. O'BRYAN

Mailing Address **115 ODIORNE POINT ROAD**

City **PORTSMOUTH** State **NH** Zip Code **03801-8703**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA11.369451**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1750.00**

TOTAL This Period (last page this line number only).....

14020684386

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)

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID P. O'BRYAN

Mailing Address **115 ODIORNE POINT ROAD**

City **PORTSMOUTH** State **NH** Zip Code **03801-8703**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371963**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERARD O'CONNOR

Mailing Address **27 CRESTHILL ROAD**

City **BRIGHTON** State **MA** Zip Code **02135-1826**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371707**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH MICHAEL O'CONNOR

Mailing Address **44 CORDEIRO DRIVE**

City **DOVER** State **NH** Zip Code **03820-6240**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369485**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

14020684387

**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 236 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. JOHN M. O'DAY

Mailing Address **41 RIVER ROAD**

City **ROLLINSFORD** State **NH** Zip Code **03869-5804**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **OTOLORYMGOLOGIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 01 / 2014**

Transaction ID : **SA11.370049**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RONALD O'HANLEY

Mailing Address **71 COMMERCIAL STREET**

City **BOSTON** State **MA** Zip Code **02109-1320**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 19 / 2014**

Transaction ID : **SA11.371506**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RONALD O'HANLEY

Mailing Address **71 COMMERCIAL STREET**

City **BOSTON** State **MA** Zip Code **02109-1320**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 19 / 2014**

Transaction ID : **SA11.371506B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5300.00

14020684388

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 237 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
RONALD O'HANLEY

Mailing Address **71 COMMERCIAL STREET**

City **BOSTON** State **MA** Zip Code **02109-1320**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373657**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. ROBERT A. O'NEILL JR.

Mailing Address **48 COMMONWEALTH AVENUE**
APARTMENT 4

City **BOSTON** State **MA** Zip Code **02116-3107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **INTERNAL AUDITOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368776**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TIM J. O'NEILL

Mailing Address **57 GREGORY DR**

City **SEEKONK** State **MA** Zip Code **02771-4301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GREENWOOD EMERGENCY VEHICLES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.371628**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

14020684389

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 238 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. NEIL OAKES

Mailing Address **212 RIVER ROAD**

City **PIERMONT** State **NH** Zip Code **03779-3004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OAKES BROS, INC.** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370725**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROLAND OBERLIN

Mailing Address **5404 HOLLY STREET**

City **BELLAIRE** State **TX** Zip Code **77401-4704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOCIETE GENERALE** Occupation **PETROLEUM ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1019.00**

Date of Receipt
 MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368490**

Amount of Each Receipt this Period
204.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROLAND OBERLIN

Mailing Address **5404 HOLLY STREET**

City **BELLAIRE** State **TX** Zip Code **77401-4704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOCIETE GENERALE** Occupation **PETROLEUM ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1019.00**

Date of Receipt
 MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371246**

Amount of Each Receipt this Period
115.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **519.00**

TOTAL This Period (last page this line number only).....

14020684390

**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 239 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
EDWARD OBRIEN

Mailing Address **21 POWERS LANE**

City **ATTLEBORO** State **MA** Zip Code **02703-1072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **TECHNOLOGY MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 29 / 2014**
Transaction ID : **SA11.369293**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT J OBRIEN SR

Mailing Address **PO 30477**

City **SEA ISLAND** State **GA** Zip Code **31561-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **07 / 26 / 2014**
Transaction ID : **SA11.369140**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT P. ODELL

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 20 / 2014**
Transaction ID : **SA11.371994**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1550.00**

TOTAL This Period (last page this line number only).....

14020684391

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 240 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
CHARLEY OHLEN

Mailing Address P.O. BOX 650551

City: **STERLING** State: **VA** Zip Code: **20165-0551**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **US POSTAL SERVICE** Occupation: **MAIL HANDLER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **300.00**

Date of Receipt: **07 / 15 / 2014**

Transaction ID : **SA11.368435**

Amount of Each Receipt this Period: **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLEY OHLEN

Mailing Address P.O. BOX 650551

City: **STERLING** State: **VA** Zip Code: **20165-0551**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **US POSTAL SERVICE** Occupation: **MAIL HANDLER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **300.00**

Date of Receipt: **08 / 01 / 2014**

Transaction ID : **SA11.369500**

Amount of Each Receipt this Period: **75.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY ORR

Mailing Address **11916 136TH AVENUE E.**

City: **PUYALLUP** State: **WA** Zip Code: **98374-4517**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **08 / 07 / 2014**

Transaction ID : **SA11.370861**

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

14020684392

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DANIEL M. PACKARD

Mailing Address **75 ATLANTIC AVENUE**

City State Zip Code
NORTH HAMPTON NH 03862-2308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEMINI VALVE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **750.00**

Date of Receipt
MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370290**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES J. PAGET

Mailing Address **1628 RIDGE HILL AVE**

City State Zip Code
INDIANAPOLIS IN 46217-4634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **375.00**

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369405**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CRAIG V. PAHIGIAN

Mailing Address **P.O. BOX 276**

City State Zip Code
AUBURN NH 03032-0276

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **225.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369199**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **650.00**
TOTAL This Period (last page this line number only)

14020684393

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 242 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CRAIG V. PAHIGIAN

Mailing Address **P.O. BOX 276**

City **AUBURN** State **NH** Zip Code **03032-0276**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.370007**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DEBRA A. PALERMINO

Mailing Address **16 RIDGE ROAD**

City **BRISTOL** State **CT** Zip Code **06010-7362**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MASS MUTUAL FINANCIOL GROUP** Occupation **INSURANCE EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370211**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE M. PALMER

Mailing Address **31557 EAGLE ROCK WAY**

City **LAGUNA BEACH** State **CA** Zip Code **92651-8299**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371720**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1300.00

14020684394

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 243 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MATT PANDOL JR.

Mailing Address **32540 PETERSON ROAD**

City DELANO	State CA	Zip Code 93215-9368
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PANDOL BROS.	Occupation FARM MANAGER
---	-----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 20 / 2014**
Transaction ID : **SA11.371910**

Amount of Each Receipt this Period **250.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER PAPPAS

Mailing Address **1 COBBLER LN**

City BEDFORD	State NH	Zip Code 03110-6100
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt **08 / 04 / 2014**
Transaction ID : **SA11.370110**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN R. PARISH

Mailing Address **P.O. BOX 1948**

City ANDREWS	State TX	Zip Code 79714-1948
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation OIL
--	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 14 / 2014**
Transaction ID : **SA11.371342**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1250.00**

TOTAL This Period (last page this line number only).....

14020684395

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 244 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RAYMOND P. PARK

Mailing Address **6200 RIVERSIDE DRIVE**

City **CLEVELAND** State **OH** Zip Code **44135-3132**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFC Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA11.368596**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND P. PARK

Mailing Address **6200 RIVERSIDE DRIVE**

City **CLEVELAND** State **OH** Zip Code **44135-3132**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFC Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA11.368596B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND P. PARK

Mailing Address **6200 RIVERSIDE DRIVE**

City **CLEVELAND** State **OH** Zip Code **44135-3132**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFC Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA11.373572**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

5200.00

14020684396

**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 245 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. A. BROOKS PARKER III

Mailing Address **321 BOSTON POST ROAD**

City **WESTON** State **MA** Zip Code **02493-2561**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372003**

Amount of Each Receipt this Period
400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDALL PARKER

Mailing Address **P.O. BOX 197**

City **MELVIN VILLAGE** State **NH** Zip Code **03850-0197**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MAXFIELD REAL ESTATE** Occupation **AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : **SA11.369235**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN PEARSON JR.

Mailing Address **140 RAVEN RD**

City **LOWELL** State **MA** Zip Code **01852-1507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PEARSON & PEARSON, LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 16 / 2014**

Transaction ID : **SA11.368441**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1150.00**

TOTAL This Period (last page this line number only).....

14020684397

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. PAUL M. PENDER

Mailing Address **70 MEETINGHOUSE ROAD**

City **BEDFORD** State **NH** Zip Code **03110-6019**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW HAMPSHIRE EYE ASSOCIATES** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369839**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD J. PENNIALL

Mailing Address **1413 8TH STREET**

City **CORONADO** State **CA** Zip Code **92118-2202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371340**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN PENSON

Mailing Address **3756 ARMSTRONG AVENUE**

City **DALLAS** State **TX** Zip Code **75205-3837**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368159**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

14020684398

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 247 OF 485
 Use separate schedule(s) for each category of the Detailed Summary Page
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. H. R. PEROT JR.
 Mailing Address P.O. BOX 269014
 City PLANO State TX Zip Code 75026-9014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PEROT SYSTEMS Occupation PRESIDENT
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2600.00

Date of Receipt
 MM / DD / YYYY
 07 / 23 / 2014
 Transaction ID : SA11.368769
 Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS S. PERRAULT JR.
 Mailing Address 257 LAWRENCE STREET APT. 7
 City METHUEN State MA Zip Code 01844-3831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PERRAULT CHIROPRACTOR OFFICES Occupation CHIROPRACTOR
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 08 / 04 / 2014
 Transaction ID : SA11.370236
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RUSSELL L. PETERSON
 Mailing Address 85 E. INDIA ROW UNIT 11G
 City BOSTON State MA Zip Code 02110-3351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROLLS REALTY, INC. Occupation REAL ESTATE MANAGEMENT
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 MM / DD / YYYY
 07 / 17 / 2014
 Transaction ID : SA11.368551
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

3850.00

14020684399

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 248 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. THOMAS PETERFFY

Mailing Address **25 CONYERS FARM DRIVE**

City **GREENWICH** State **CT** Zip Code **06831-2736**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INTERACTIVE BROWNS GROUP** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368775**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GREGORY K. PHELPS

Mailing Address **15 MAPLE ROAD**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2216**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MANULIFE ASSET MANAGEMENT** Occupation **PORTFOLIO MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369902**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT PHILLIPS

Mailing Address **11 ALEXIS LN**

City **HAMPTON FALLS** State **NH** Zip Code **03844-2106**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TURNRIGHT ADVICE SOLUTIONS, IC** Occupation **CHIEF TECHNOLOGY OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.371558**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2950.00**

TOTAL This Period (last page this line number only).....

14020684400

**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 249 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) MR. BERNARD N. PLANTE		Date of Receipt MM / DD / YYYY 08 / 18 / 2014
Mailing Address 41 PARRISH HILL DRIVE		Transaction ID : SA11.371767
City NASHUA	State NH	Zip Code 03063-2731
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) MR. DICK POLLARD		Date of Receipt MM / DD / YYYY 07 / 30 / 2014
Mailing Address 6609 NORFOLK AVENUE		Transaction ID : SA11.369529
City LUBBOCK	State TX	Zip Code 79413-5902
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) MR. DICK POLLARD		Date of Receipt MM / DD / YYYY 08 / 14 / 2014
Mailing Address 6609 NORFOLK AVENUE		Transaction ID : SA11.371335
City LUBBOCK	State TX	Zip Code 79413-5902
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

14020684401

**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 250 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL E. PORTER

Mailing Address **44 GREEN HILL ROAD**

City **BROOKLINE** State **MA** Zip Code **02445-5933**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HARVARD BUSINESS SCHOOL** Occupation **UNIVERSITY PROFESSOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **08 / 06 / 2014**
Transaction ID : **SA11.370624**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN POWERS

Mailing Address **46 COUNTY ROAD**

City **AMHERST** State **NH** Zip Code **03031-2647**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **HOSPITAL ADMINISTRATION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 11 / 2014**
Transaction ID : **SA11.368240**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PAMELA G. PRICE

Mailing Address **10 MOUNTAIN LAURELS DRIVE #603**

City **NASHUA** State **NH** Zip Code **03062-2248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 18 / 2014**
Transaction ID : **SA11.371816**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3350.00**

TOTAL This Period (last page this line number only).....

1402068402

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 251 OF 485	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
WILLIAM PRICKETT

Mailing Address **205 MAPLE ST**

City **DANVERS** State **MA** Zip Code **01923-2101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEYFARTH SHAW** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 / /
08 / 19 / 2014

Transaction ID : SA11.371499

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JACQUES A. PRINDIVILLE

Mailing Address **1550 WORCESTER ROAD**

City **FRAMINGHAM** State **MA** Zip Code **01702-8985**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 / /
07 / 23 / 2014

Transaction ID : SA11.368847

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JACQUES A. PRINDIVILLE

Mailing Address **1550 WORCESTER ROAD**

City **FRAMINGHAM** State **MA** Zip Code **01702-8985**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 / /
08 / 20 / 2014

Transaction ID : SA11.372050

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

14020684403

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 252 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JACQUES A. PRINDIVILLE

Mailing Address **1550 WORCESTER ROAD**

City **FRAMINGHAM** State **MA** Zip Code **01702-8985**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372051**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL E. PROCTOR

Mailing Address **5401 VERNER DRIVE**

City **LA PALMA** State **CA** Zip Code **90623-2043**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TRI WEST** Occupation **WHOLESALE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370193**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EARL PROLMAN

Mailing Address **100 ELM STREET**

City **NASHUA** State **NH** Zip Code **03060-6470**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW YORK LIFE INSURANCE COMPANY** Occupation **INSURANCE AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : **SA11.369162**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1050.00**

TOTAL This Period (last page this line number only).....

14020684404

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
MR. JEFFERY PURTELL

Mailing Address **31 PLEASANT POINT DRIVE**

City State Zip Code
PORTSMOUTH NH 03801-5224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PURTELL INVESTMENT COMPANY, INC. BUY/SELL STEUBEN GLASS SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369437**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. HARRY QUARLS

Mailing Address **3832 GREENBRIER DRIVE**

City State Zip Code
DALLAS TX 75225-5217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLOBAL INFRASTRUCTURE PARTNERS PRIVATE EQUITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4100.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370280**

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. HARRY QUARLS

Mailing Address **3832 GREENBRIER DRIVE**

City State Zip Code
DALLAS TX 75225-5217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLOBAL INFRASTRUCTURE PARTNERS PRIVATE EQUITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4100.00**

Date of Receipt
 MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.370280B**

Amount of Each Receipt this Period
-1500.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

14020684405

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 254 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HARRY QUARLS

Mailing Address **3832 GREENBRIER DRIVE**

City **DALLAS** State **TX** Zip Code **75225-5217**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GLOBAL INFRASTRUCTURE PARTNERS** Occupation **PRIVATE EQUITY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4100.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373630**

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. QUATTROMANI

Mailing Address **51 MANNING STREET**

City **PROVIDENCE** State **RI** Zip Code **02906-3130**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368788**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. QUATTROMANI

Mailing Address **51 MANNING STREET**

City **PROVIDENCE** State **RI** Zip Code **02906-3130**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.368788B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

14020684406

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 255 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. QUATTROMANI

Mailing Address **51 MANNING STREET**

City **PROVIDENCE** State **RI** Zip Code **02906-3130**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373584**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
DR. GREGORY L. QUICK

Mailing Address **32 RIDGE ROAD**

City **NORFOLK** State **MA** Zip Code **02056-1746**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STEWART HEALTH CARE** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370780**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL J. QUIRK

Mailing Address **P.O. BOX 850972**

City **BRAINTREE** State **MA** Zip Code **02185-0972**

FEC ID number of contributing federal political committee. **C**

Name of Employer **QUIRK AUTO DEALERS** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371964**

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5300.00

14020684407

**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 256 OF 485	
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DANIEL J. QUIRK

Mailing Address **P.O. BOX 850972**

City **BRAINTREE** State **MA** Zip Code **02185-0972**

FEC ID number of contributing federal political committee. **C**

Name of Employer **QUIRK AUTO DEALERS** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : SA11.371964B

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. DANIEL J. QUIRK

Mailing Address **P.O. BOX 850972**

City **BRAINTREE** State **MA** Zip Code **02185-0972**

FEC ID number of contributing federal political committee. **C**

Name of Employer **QUIRK AUTO DEALERS** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : SA11.373671

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. SCOTT W. RAHN

Mailing Address **2250 N. WAYNE AVENUE**

City **CHICAGO** State **IL** Zip Code **60614-3123**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt **07 / 11 / 2014**

Transaction ID : SA11.368429

Amount of Each Receipt this Period
-1000.00
 CONTRIBUTION

CHECK RETURNED BY BANK

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

-1000.00

14020684408

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 257 OF 485
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
GERALD RAMSEY

Mailing Address **6300 RICHMOND PLACE**

City **NORFOLK** State **VA** Zip Code **23508-1128**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INSTANT SYSTEMS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369373**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GERALD RAMSEY

Mailing Address **6300 RICHMOND PLACE**

City **NORFOLK** State **VA** Zip Code **23508-1128**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INSTANT SYSTEMS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 10 / 2014

Transaction ID : **SA11.371095**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN RASMUSSEN

Mailing Address **525 MEAD COURT**

City **GENEVA** State **IL** Zip Code **60134-2528**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371341**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

14020684409

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 258 OF 485		
	(check only one)	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. MARSHA A. RAWLINGS

Mailing Address **6 GREENMEADOW LN**

City BEDFORD	State NH	Zip Code 03110-6301
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**
08 / 18 / 2014

Transaction ID : SA11.371532

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD RAWLINGS

Mailing Address **6 GREENMEADOW LN**

City BEDFORD	State NH	Zip Code 03110-6301
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **MM / DD / YYYY**
08 / 18 / 2014

Transaction ID : SA11.371536

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEN REEDER

Mailing Address **3810 MONETS LANE**

City CINCINNATI	State OH	Zip Code 45241-3864
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PAR EXCELLENCE SYSTEMS, INC.	Occupation SOFTWARE DEVELOPER
---	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt **MM / DD / YYYY**
07 / 25 / 2014

Transaction ID : SA11.369130

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

14020684410

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)
 11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 259 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. TREVOR D. REES-JONES

Mailing Address **5956 SHERRY LANE**
SUITE 1500

City **DALLAS** State **TX** Zip Code **75225-8026**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHIEF OIL AND GAS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
08 / 16 / 2014

Transaction ID : **SA11.368777**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TREVOR D. REES-JONES

Mailing Address **5956 SHERRY LANE**
SUITE 1500

City **DALLAS** State **TX** Zip Code **75225-8026**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHIEF OIL AND GAS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.368777B**

Amount of Each Receipt this Period
-2400.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. TREVOR D. REES-JONES

Mailing Address **5956 SHERRY LANE**
SUITE 1500

City **DALLAS** State **TX** Zip Code **75225-8026**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHIEF OIL AND GAS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373581**

Amount of Each Receipt this Period
2400.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

5000.00

14020684411

**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 260 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. JOAN REILLY

Mailing Address **1246 E. 32ND STREET**

City **BROOKLYN** State **NY** Zip Code **11210-4743**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370354**

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. REILLY

Mailing Address **38 CLIFFSIDE DRIVE**

City **PLYMOUTH** State **MA** Zip Code **02360-1472**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371992**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PATRICIA G. REILLY

Mailing Address **60 N. AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL** Occupation **VP OPERATIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.371510**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

625.00

14020684412

**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 261 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. GEORGE A. REMICK

Mailing Address **1247 SOUTH STREET**

City **PORTSMOUTH** State **NH** Zip Code **03801-5426**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SA11.371029**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DEBORAH A. REMILLARD

Mailing Address **306 CROYDON TURNPIKE**

City **CROYDON** State **NH** Zip Code **03773-6122**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369941**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT P. REMILLARD

Mailing Address **P.O. BOX 675**

City **NEWPORT** State **NH** Zip Code **03773-0675**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA11.369943**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

14020684413

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 262 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT L. REWEY

Mailing Address **810 SOUTH OCEAN BLVD.**

City **PALM BEACH** State **FL** Zip Code **33480-4815**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369571**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES REYNOLDS

Mailing Address **P.O. BOX 396**

City **DOVER** State **NH** Zip Code **03821-0396**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371937**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANCIS REYNOLDS

Mailing Address **81 LAKE SHORE RD**

City **SALEM** State **NH** Zip Code **03079-1975**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PIXARBIO CORP** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
08 / 12 / 2014

Transaction ID : **SA11.371119**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

14020684414

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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. DAVID RIESTER

Mailing Address **9 RUSSET LANE**

City **LYNNFIELD** State **MA** Zip Code **01940-1148**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHWEST ALLERGY** Occupation **MEDICAL DOCTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 MM / DD / YYYY
07 / 16 / 2014

Transaction ID : **SA11.368443**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. H. DOUGLAS RILEY

Mailing Address **4400 N. SCOTTSDALE ROAD**

City **SCOTTSDALE** State **AZ** Zip Code **85251-3331**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RILEY RESOURCES** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370202**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY M. RILEY

Mailing Address **67 BRICK MILL ROAD**

City **BEDFORD** State **NH** Zip Code **03110-5115**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371790**

Amount of Each Receipt this Period
2250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3350.00

TOTAL This Period (last page this line number only).....

14020684415

**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 264 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. TUULI-ANN RISTKOK

Mailing Address **16 W. 16TH STREET**
APARTMENT 4J-N

City **NEW YORK** State **NY** Zip Code **10011-6329**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11.371658**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM M. RIZZO JR.

Mailing Address **P.O. BOX 45236**

City **SOMERVILLE** State **MA** Zip Code **02145-0006**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 11 / 2014

Transaction ID : **SA11.368141**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN ROBBINS

Mailing Address **10234 E. SPRING CREEK ROAD**

City **SUN LAKES** State **AZ** Zip Code **85248-6887**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : **SA11.370979**

Amount of Each Receipt this Period
20.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

770.00

770.00

14020684416

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 265 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. NORBERT ROBERTIE

Mailing Address P.O. BOX 406

City: RUMNEY State: NH Zip Code: 03266-0406

FEC ID number of contributing federal political committee: **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFF(Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 20 / 2014
Transaction ID : SA11.371985

Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD D. ROBERTS

Mailing Address 1109 S. BAY SHORE DRIVE

City: VIRGINIA BEACH State: VA Zip Code: 23451-3807

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2250.00

Date of Receipt: 08 / 04 / 2014
Transaction ID : SA11.370346

Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROD RODRIGUE

Mailing Address 2708 DEER BERRY COURT

City: LONGWOOD State: FL Zip Code: 32779-3071

FEC ID number of contributing federal political committee: **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFF(Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 18 / 2014
Transaction ID : SA11.371761

Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 2500.00

TOTAL This Period (last page this line number only).....

14020684417

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 266 OF 485
 Use separate schedule(s) for each category of the Detailed Summary Page
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MARK ROELLIG

Mailing Address **11 COBTAIL WAY**

City **SIMSBURY** State **CT** Zip Code **06070-2530**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MASSACHUSETTS MUTUAL LIFE INSURANC** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SA11.370217**

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROBERTA ROGERS

Mailing Address **14515 W. GRANITE VALLEY DR. APT. E**

City **SUN CITY WEST** State **AZ** Zip Code **85375-6024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA11.368506**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROBERTA ROGERS

Mailing Address **14515 W. GRANITE VALLEY DR. APT. E**

City **SUN CITY WEST** State **AZ** Zip Code **85375-6024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA11.370069**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2400.00**

TOTAL This Period (last page this line number only).....

14020684418

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 267 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MIKE ROLLAND

Mailing Address **11 MANCHESTER RD.**

City **AMHERST** State **NH** Zip Code **03031-2545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE VANGUARD CO. LLC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 12 / 2014

Transaction ID : **SA11.371117**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL T. ROLLINGS

Mailing Address **5 DURHAM ROAD**

City **LONGMEADOW** State **MA** Zip Code **01106-1507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MASSMUTUAL FINANCIAL GROUP** Occupation **INSURANCE EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370218**

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MATTHEW ROSENTHAL

Mailing Address **3 WHITEHOUSE LANE**

City **WESTON** State **MA** Zip Code **02493-2300**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EASTHAM CAPITAL** Occupation **REAL ESTATE FUND MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369448**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5100.00

5100.00

14020684419

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 268 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. MICHAEL M. ROSEN

Mailing Address **631 MAITLAND AVENUE**

City **TEANECK** State **NJ** Zip Code **07666-2263**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DAUICHI SANKYO** Occupation **REGULATORY AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370777**

Amount of Each Receipt this Period **375.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD C. ROSS

Mailing Address **3480 SAINT HELENA HIGHWAY N.**

City **SAINT HELENA** State **CA** Zip Code **94574-9710**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371387**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVEN ROTH

Mailing Address **888 SEVENTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10106-0001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VORNADO REALTY TRUST** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368595**

Amount of Each Receipt this Period **10400.00**

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

11025.00

14020684420

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 269 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DONALD C ROY

Mailing Address **2 MADELEINE CT**

City **NASHUA** State **NH** Zip Code **03051-3267**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SERVICE LIGHTING EXPRESS INC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 08 / 2014**
Transaction ID : SA11.370879

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN RUAN

Mailing Address **666 GRAND AVENUE**

City **DES MOINES** State **IA** Zip Code **50309-2506**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUAN, INC.** Occupation **BUSINESS EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 04 / 2014**
Transaction ID : SA11.370389

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BEN RUBENSTEIN

Mailing Address **32 RUTLAND ST. - UNIT 1L**

City **BOSTON** State **MA** Zip Code **02118-1580**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HORIZON BEVERAGE COMPANY** Occupation **PRINCIPAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 07 / 2014**
Transaction ID : SA11.370494

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **600.00**

TOTAL This Period (last page this line number only)

1402068421

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 270 OF 485
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BRUCE RUBINGER

Mailing Address **47 CABOT STREET**

City **NEWTON** State **MA** Zip Code **02458-2501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GLOBAL COMPETITIVENESS** Occupation **MANAGING DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.370253

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHIL RUFFIN

Mailing Address **7030 TOMIYASU**

City **LAS VEGAS** State **NV** Zip Code **89120-3050**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUFFIN COMPANIES** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.368598

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHIL RUFFIN

Mailing Address **7030 TOMIYASU**

City **LAS VEGAS** State **NV** Zip Code **89120-3050**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUFFIN COMPANIES** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : SA11.368598B

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5350.00

14020684422

**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 271 OF 485	
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PHIL RUFFIN

Mailing Address **7030 TOMIYASU**

City **LAS VEGAS** State **NV** Zip Code **89120-3050**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUFFIN COMPANIES** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373574**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MRS. MARY R. RUHLIN

Mailing Address **100 SOMERBY DRIVE APT. 2134**

City **ALPHARETTA** State **GA** Zip Code **30009-8785**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370405**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NICK RUNNEBOHM

Mailing Address **3177 S. 375 E.**

City **SHELBYVILLE** State **IN** Zip Code **46176-9245**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369932**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

14020684423

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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. RUSSELL SR.

Mailing Address **3440 S. LOOP W.**

City **HOUSTON** State **TX** Zip Code **77025-5205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369655**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID A. RUST

Mailing Address **9450 HOLSEY ROAD**

City **DAMASCUS** State **MD** Zip Code **20872-2416**

FEC ID number of contributing federal political committee. **C**

Name of Employer **S.S.A.** Occupation **SENIOR EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370308**

Amount of Each Receipt this Period
75.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT W. RUST

Mailing Address **1430 S DIXIE HWY STE 315**

City **CORAL GABLES** State **FL** Zip Code **33146-3174**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369864**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2825.00

14020684424

**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 273 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DAWSON RUTTER

Mailing Address **280 BEACON ST**

City **BOSTON** State **MA** Zip Code **02116-1230**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COMMONWEALTH LIMOUSINE SERVICE, INC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 08 / 2014**

Transaction ID : **SA11.367696**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL RYAN

Mailing Address **25 BYRON ST**

City **WATERBURY** State **CT** Zip Code **06704-1702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368953**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOWARD ALLEN RYAN

Mailing Address **886 SEA DUNE LANE**

City **MARCO ISLAND** State **FL** Zip Code **34145-1840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368767**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1300.00**

TOTAL This Period (last page this line number only).....

14020684425

**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)

11a 11b 11c 11d 12 13a 13b 14 15

PAGE 274 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HOWARD ALLEN RYAN

Mailing Address **886 SEA DUNE LANE**

City **MARCO ISLAND** State **FL** Zip Code **34145-1840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371247**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LORIN RYDSTROM

Mailing Address **124 DOW ROAD**

City **HOLLIS** State **NH** Zip Code **03049-6505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **F. C. T. G.** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369595**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JUDY SABANEK

Mailing Address **258 SEWALL ROAD**

City **WOLFEBORO** State **NH** Zip Code **03894-4109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : **SA11.369258**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

600.00

14020684426

**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 275 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RUSSELL SABANEK

Mailing Address **258 SEWALL ROAD**

City **WOLFEBORO** State **NH** Zip Code **03894-4109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369267**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL SALTER

Mailing Address **82 MACK HILL ROAD**

City **AMHERST** State **NH** Zip Code **03031-3222**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371929**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BENNY W. SANDERS

Mailing Address **17 LOON SONG LANE**

City **MOULTONBOROUGH** State **NH** Zip Code **03254-2647**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.372001**

Amount of Each Receipt this Period
3000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4250.00

14020684427

**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 276 OF 485	
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BENNY W. SANDERS

Mailing Address **17 LOON SONG LANE**

City **MOULTONBOROUGH** State **NH** Zip Code **03254-2647**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.372001B**

Amount of Each Receipt this Period
-400.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
MR. BENNY W. SANDERS

Mailing Address **17 LOON SONG LANE**

City **MOULTONBOROUGH** State **NH** Zip Code **03254-2647**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.373675**

Amount of Each Receipt this Period
400.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
MS. JEANNE V. SANDERS

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999-**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371999**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

14020684428

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ELAINE SARYNSKI

Mailing Address **75 BARNDOR HILLS DRIVE**

City **SUFFIELD** State **CT** Zip Code **06078-1360**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MASS MUTUAL FINANCIAL GROUP** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt **07 / 30 / 2014**
Transaction ID : **SA11.369512**

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAVINO SAVO

Mailing Address **87 POUCH TERRACE**

City **STATEN ISLAND** State **NY** Zip Code **10305-2732**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 18 / 2014**
Transaction ID : **SA11.371684**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HON. DANFORD L. SAWYER

Mailing Address **10556 ELK CREEK PARKWAY**

City **ELK CREEK** State **VA** Zip Code **24326-2124**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 08 / 2014**
Transaction ID : **SA11.371033**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1850.00**

TOTAL This Period (last page this line number only).....

14020684429

**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 278 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. NELSON SCHAELEN JR.

Mailing Address **56 MIDWOOD TERRACE**

City **MADISON** State **NJ** Zip Code **07940-2735**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371898**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. SCHARRER

Mailing Address **3523 CARDENAS PLACE NE**

City **ALBUQUERQUE** State **NM** Zip Code **87110-2031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368539**

Amount of Each Receipt this Period
400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SONIA SCHELLER

Mailing Address **P.O. BOX 21**

City **WENTWORTH** State **NH** Zip Code **03282-0021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.370100**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **1150.00**

TOTAL This Period (last page this line number only)

14020684430

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)
 11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 279 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN J. SCHICKLING

Mailing Address **P.O. BOX 306**

City **WOLFEBORO** State **NH** Zip Code **03894-0306**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA11.370271**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNETH SCHICIANO

Mailing Address **43 HIGHGATE ROAD**

City **WELLESLEY** State **MA** Zip Code **02481-1419**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TA ASSOCIATES** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368603**

Amount of Each Receipt this Period **2600.00**

CONTRIBUTION

IN-KIND: CATERING

C. Full Name (Last, First, Middle Initial)
MR. JAMES H. SCHLOEMER

Mailing Address **8025 N. GRAY LOG LANE**

City **MILWAUKEE** State **WI** Zip Code **53217-2954**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CONTINENTAL PROPERTIES CO., INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369795**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3850.00**

TOTAL This Period (last page this line number only).....

14020684431

**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 280 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM SCHMUS

Mailing Address **19755 KILLARNEY WAY**

City **BROOKFIELD** State **WI** Zip Code **53045-2136**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SA11.369475**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM SCHMUS

Mailing Address **19755 KILLARNEY WAY**

City **BROOKFIELD** State **WI** Zip Code **53045-2136**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371869**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARILYN SCHNUCK

Mailing Address **131 LINDEN AVENUE**

City **SAINT LOUIS** State **MO** Zip Code **63105-3839**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5700.00**

Date of Receipt
 MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368507**

Amount of Each Receipt this Period
4200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

4400.00

14020684432

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 281 OF 485
 Use separate schedule(s) for each category of the Detailed Summary Page
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. MARILYN SCHNUCK
 Mailing Address **131 LINDEN AVENUE**
 City **SAINT LOUIS** State **MO** Zip Code **63105-3839**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **RETIRED**
 Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
08 / 16 / 2014
Transaction ID : SA11.368507B
 Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION
[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MS. MARILYN SCHNUCK
 Mailing Address **131 LINDEN AVENUE**
 City **SAINT LOUIS** State **MO** Zip Code **63105-3839**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **RETIRED**
 Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
08 / 16 / 2014
Transaction ID : SA11.373565
 Amount of Each Receipt this Period
2600.00
 CONTRIBUTION
[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. DAVID SCHOFIELD
 Mailing Address **53 RIBAUT DRIVE**
 City **HILTON HEAD ISLAND** State **SC** Zip Code **29926-1987**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **RETIRED**
 Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
08 / 14 / 2014
Transaction ID : SA11.371288
 Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

100.00
100.00

14020684433

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 282 OF 485
 Use separate schedule(s) for each category of the Detailed Summary Page
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROGER L. SCHRAMM
 Mailing Address 4826 FAVOR ROAD
 City State Zip Code
 ROCKTON IL 61072-9407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROCK VALLEY OIL & CHEMICAL CO. C.E.O.
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 08 / 14 / 2014
 Transaction ID : SA11.371430
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN L. SCHWERIN
 Mailing Address 667 OCEAN ROAD
 City State Zip Code
 VERO BEACH FL 32963-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RELATED PROPERTIES REAL ESTATE INVESTOR
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 08 / 14 / 2014
 Transaction ID : SA11.371303
 Amount of Each Receipt this Period
 5200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN L. SCHWERIN
 Mailing Address 667 OCEAN ROAD
 City State Zip Code
 VERO BEACH FL 32963-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RELATED PROPERTIES REAL ESTATE INVESTOR
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 08 / 19 / 2014
 Transaction ID : SA11.371303B
 Amount of Each Receipt this Period
 -2600.00
 CONTRIBUTION
(MEMO ITEM)
 REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5450.00

14020684434

**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 283 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WARREN L. SCHWERIN

Mailing Address **667 OCEAN ROAD**

City **VERO BEACH** State **FL** Zip Code **32963-3517**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RELATED PROPERTIES** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : SA11.373650

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MS. EILEEN F. SCOTTI

Mailing Address **12 SALT MARSH HILL**

City **SCITUATE** State **MA** Zip Code **02066-4248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOWN OF SCITUATE** Occupation **PUBLIC HEALTH NURSE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 02 / 2014

Transaction ID : SA11.367390

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. EILEEN F. SCOTTI

Mailing Address **12 SALT MARSH HILL**

City **SCITUATE** State **MA** Zip Code **02066-4248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOWN OF SCITUATE** Occupation **PUBLIC HEALTH NURSE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
07 / 26 / 2014

Transaction ID : SA11.369145

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

300.00

14020684435

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 284 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ROY SCOTT

Mailing Address **11 LAUREL LN**

City **WILBRAHAM** State **MA** Zip Code **01095-1565**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 18 / 2014

Transaction ID : **SA11.368615**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. SCULLY

Mailing Address **771 MANATEE COVE**

City **VERO BEACH** State **FL** Zip Code **32963-3730**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370679**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
R. BROOKS SCURRY

Mailing Address **2256 CUMMING ROAD**

City **AUGUSTA** State **GA** Zip Code **30904-6901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370373**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **1500.00**

TOTAL This Period (last page this line number only)

14020684436

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. EDWIN SEABURY

Mailing Address **24 GREEN PASTURES ROAD**

City **EDGARTOWN** State **MA** Zip Code **02539-4013**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **355.00**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA11.371047**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ERNIE D. SEMERSKY

Mailing Address **1301 LOCH LANE**

City **LAKE FOREST** State **IL** Zip Code **60045-3347**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
07 / 10 / 2014

Transaction ID : **SA11.368094**

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

CHARGED BACK

C. Full Name (Last, First, Middle Initial)
MR. FRANK SESTITO

Mailing Address **11 FIELDSTONE CIRCLE**

City **HAMPTON** State **NH** Zip Code **03842-1172**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOTAL ENERGY SOLUTIONS, L.L.C.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371683**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

-2250.00

14020684437

**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 286 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. NANCY J. SEVRENS

Mailing Address P.O. BOX 428

City: NANTUCKET State: MA Zip Code: 02554-0428

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 328.00

Date of Receipt: 07 / 30 / 2014

Transaction ID : SA11.369709

Amount of Each Receipt this Period: 164.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY J. SEVRENS

Mailing Address P.O. BOX 428

City: NANTUCKET State: MA Zip Code: 02554-0428

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 328.00

Date of Receipt: 08 / 18 / 2014

Transaction ID : SA11.371568

Amount of Each Receipt this Period: 164.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN G. SHAHABIAN

Mailing Address 64 CEDAR STREET

City: FOXBORO State: MA Zip Code: 02035-3107

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED Occupation: SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 04 / 2014

Transaction ID : SA11.370243

Amount of Each Receipt this Period: 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

528.00

14020684438

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHARLES WELLS SHARTLE

Mailing Address P.O. BOX 1049

City State Zip Code
CROCKETT TX 75835-1049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369601**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES WELLS SHARTLE

Mailing Address P.O. BOX 1049

City State Zip Code
CROCKETT TX 75835-1049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369903**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES WELLS SHARTLE

Mailing Address P.O. BOX 1049

City State Zip Code
CROCKETT TX 75835-1049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371741**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

350.00

14020684439

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
FRANCIS SHEA

Mailing Address **67 MORNINGSID DR**

City **ARLINGTON** State **MA** Zip Code **02474-1938**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PLM VENTURES** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 24 / 2014

Transaction ID : **SA11.368750**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY D. SHEEHY

Mailing Address **INFO REQUESTED**

City **INFO REQUESTED** State **XX** Zip Code **99999**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370226**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE SHELTON

Mailing Address **4124 KINGSFERRY DRIVE**

City **ARLINGTON** State **TX** Zip Code **76016-3636**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369215**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

14020684440

**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 289 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STEVEN A. SHENFELD

Mailing Address **2A MELBY LANE**

City **ROSLYN** State **NY** Zip Code **11576-2519**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MIDOCEAN PARTNERS** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371749**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HON. GEORGE P. SHULTZ

Mailing Address **434 GALVE MALL
ROOM 239**

City **STANFORD** State **CA** Zip Code **94305-6003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOOVER INSTITUTION** Occupation **DISTINGUISHED FELLOW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369587**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TUCKER C. SHUMACK

Mailing Address **2346 S. NASH STREET**

City **ARLINGTON** State **VA** Zip Code **22202-1548**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OGILVY GOVERNMENT RELATIONS** Occupation **PRINCIPAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA11.371032**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

14020684441

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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 Use separate schedule(s) for each category of the Detailed Summary Page
 11a 11b 11c 11d
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ERIC SILVERMAN
 Mailing Address 95 CLINTON ROAD
 City State Zip Code
BROOKLINE MA 02445-5812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
EASTHAM CAPITAL REAL ESTATE FUND MANAGER
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014
Transaction ID : SA11.370470
 Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARDWICK SIMMONS
 Mailing Address 83 HAMMETTS COVE RD
 City State Zip Code
MARION MA 02738-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2014
Transaction ID : SA11.369152
 Amount of Each Receipt this Period
600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN G. SIMMS
 Mailing Address 11350 SW 132 COURT
 City State Zip Code
MIAMI FL 33186-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 11 / 2014
Transaction ID : SA11.368332
 Amount of Each Receipt this Period
150.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

3350.00
CONTRIBUTION

14020684442

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)

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ALLEN SIMON

Mailing Address **1383 N CRISS ST**

City **CHANDLER** State **AZ** Zip Code **85226-1307**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
07 / 08 / 2014

Transaction ID : **SA11.367734**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
J. RONALD SKIPPER

Mailing Address **3415 W FOREST LAKE CIR**

City **SARASOTA** State **FL** Zip Code **34232-4770**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FERGESON, SKIPPER, ET AL.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370526**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PAULA M. SLATTERY

Mailing Address **1024 OCEAN BLVD.**

City **HAMPTON** State **NH** Zip Code **03842-1500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371535**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

14020684443

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 292 OF 485
(check only one)

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WAYNE SLATTERY

Mailing Address 1024 OCEAN BLVD.

City HAMPTON State NH Zip Code 03842-1500

FEC ID number of contributing federal political committee. **C**

Name of Employer THE F.I.R.M. Occupation FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SA11.371538

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM SLIVINSKI

Mailing Address 46 BERKELEY STREET

City NASHUA State NH Zip Code 03064-1935

FEC ID number of contributing federal political committee. **C**

Name of Employer PEPPERELL BRAIDING COMPANY Occupation BUSINESSMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SA11.369507

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HUNTER SMITH

Mailing Address 1160 TENNIS ROAD

City CHARLOTTESVILLE State VA Zip Code 22901-5031

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SA11.368193

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

14020684444

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LARRY SMITH

Mailing Address **65 EAST INDIA ROW 39B**

City **BOSTON** State **MA** Zip Code **02110-3387**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATION SAFE DRIVER** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371207**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARSHALL SMITH

Mailing Address **26535 WESTON DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-1937**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONTRACT CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 08 / 2014

Transaction ID : **SA11.367756**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARSHALL SMITH

Mailing Address **26535 WESTON DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-1937**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONTRACT CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 22 / 2014

Transaction ID : **SA11.368665**

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

14020684445

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MARSHALL SMITH

Mailing Address **26535 WESTON DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-1937**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONTRACT CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : **SA11.369487**

Amount of Each Receipt this Period **25.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARSHALL SMITH

Mailing Address **26535 WESTON DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-1937**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONTRACT CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371160**

Amount of Each Receipt this Period **25.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RANDALL SMITH

Mailing Address **325 E. 53RD STREET #3**

City **NEW YORK** State **NY** Zip Code **10022-4923**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAPITAL COUNSEL LLC** Occupation **INVESTMENT ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 11 / 2014**

Transaction ID : **SA11.368228**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **550.00**

TOTAL This Period (last page this line number only).....

14020684446

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 295 OF 485
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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. MARILYN F. SMYK

Mailing Address **7 BUNKER HILL AVENUE**

City **STRATHAM** State **NH** Zip Code **03885-2404**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368523**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARILYN F. SMYK

Mailing Address **7 BUNKER HILL AVENUE**

City **STRATHAM** State **NH** Zip Code **03885-2404**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368806**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER H. SMYTH

Mailing Address **56 RUSSELL STREET**

City **MILTON** State **MA** Zip Code **02186-3535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GREATER MEDIA INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt
07 / 15 / 2014

Transaction ID : **SA11.368421**

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5550.00**

TOTAL This Period (last page this line number only).....

14020684447

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: (check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
CATHERINE SMYTH

Mailing Address **56 RUSSELL STREET**

City **MILTON** State **MA** Zip Code **02186-3535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PARNERS HEALTHCARE** Occupation **SOCIAL WORKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.370474**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

B. Full Name (Last, First, Middle Initial)
MR. PETER H. SMYTH

Mailing Address **56 RUSSELL STREET**

City **MILTON** State **MA** Zip Code **02186-3535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GREATER MEDIA INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.368421B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)
MR. PETER H. SMYTH

Mailing Address **56 RUSSELL STREET**

City **MILTON** State **MA** Zip Code **02186-3535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GREATER MEDIA INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.370475B**

Amount of Each Receipt this Period
-300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684448

**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)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PETER H. SMYTH

Mailing Address **56 RUSSELL STREET**

City **MILTON** State **MA** Zip Code **02186-3535**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GREATER MEDIA INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.370477**

Amount of Each Receipt this Period
300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
BRUCE SOLL

Mailing Address **141 SOUTH DREXEL AVENUE**

City **BEXLEY** State **OH** Zip Code **43209-1739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIMITED BRANDS** Occupation **BRUCE SOLL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369125**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRUCE SOLL

Mailing Address **141 SOUTH DREXEL AVENUE**

City **BEXLEY** State **OH** Zip Code **43209-1739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIMITED BRANDS** Occupation **BRUCE SOLL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.369125B**

Amount of Each Receipt this Period
-900.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1000.00

14020684449

**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)
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
BRUCE SOLL

Mailing Address **141 SOUTH DREXEL AVENUE**

City **BEXLEY** State **OH** Zip Code **43209-1739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIMITED BRANDS** Occupation **BRUCE SOLL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.373588**

Amount of Each Receipt this Period
900.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA WELLS SOMERVILLE

Mailing Address **14 MARSCOT WAY**

City **PLYMOUTH** State **MA** Zip Code **02360-4720**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA11.371260**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD SORENSON

Mailing Address **P.O. BOX 1595**

City **LACONIA** State **NH** Zip Code **03247-1595**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369166**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

600.00

14020684450

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD SOUTHWICK

Mailing Address **12 RUNNYMEADE DRIVE**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2328**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOUTHWICK CONSTRUCTION, INC.** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371537**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. TERESA SOUTHWICK

Mailing Address **12 RUNNYMEADE DRIVE**

City **NORTH HAMPTON** State **NH** Zip Code **03862-2328**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOUTHWICK CONSTRUCTION, INC.** Occupation **VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371528**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY SPRAGENS

Mailing Address **7426 FISHER ISLAND DRIVE**

City **FISHER ISLAND** State **FL** Zip Code **33109-0765**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
MM / DD / YYYY
07 / 13 / 2014

Transaction ID : **SA11.368351**

Amount of Each Receipt this Period
150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

650.00

14020684451

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CLINTON H. SPRINGER

Mailing Address **P.O. BOX 288**

City **NEW CASTLE** State **NH** Zip Code **03854-0288**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370769**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RALPH SPUEHLER JR.

Mailing Address **P.O. BOX 299**

City **WOLFEBORO** State **NH** Zip Code **03894-0299**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371526**

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN P. STABILE II

Mailing Address **48 LUTHERAN DRIVE**

City **NASHUA** State **NH** Zip Code **03063-2914**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369522**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

14020684452

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PETER D. STAHL

Mailing Address **6 HILLSIDE AVENUE**

City **WINCHESTER** State **MA** Zip Code **01890-2816**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369511**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID N. STAPLEFORD

Mailing Address **13 WOODLAND DRIVE**

City **NASHUA** State **NH** Zip Code **03063-2056**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368877**

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID N. STAPLEFORD

Mailing Address **13 WOODLAND DRIVE**

City **NASHUA** State **NH** Zip Code **03063-2056**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.370055**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

385.00

14020684453

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STUART STEDMAN

Mailing Address **2727 ALLEN PARKWAY STE. 480**

City **HOUSTON** State **TX** Zip Code **77019-2100**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STEDMAN WEST INTERESTS, INC.** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368690**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STUART STEDMAN

Mailing Address **2727 ALLEN PARKWAY STE. 480**

City **HOUSTON** State **TX** Zip Code **77019-2100**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STEDMAN WEST INTERESTS, INC.** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.368690B**

Amount of Each Receipt this Period
-2600.00
 CONTRIBUTION

[MEMO ITEM]
 REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. STUART STEDMAN

Mailing Address **2727 ALLEN PARKWAY STE. 480**

City **HOUSTON** State **TX** Zip Code **77019-2100**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STEDMAN WEST INTERESTS, INC.** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373576**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

[MEMO ITEM]
 REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

14020684454

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ARLAND T. STEIN

Mailing Address **4296 PRESERVATION AVENUE**

City **NEW ALBANY** State **OH** Zip Code **43054-5002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369926**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN STEINKRAUSS

Mailing Address **6 CARMINE ROAD**

City **NASHUA** State **NH** Zip Code **03063-3005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11.369473**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEONARD M. STEINER JR.

Mailing Address **P.O. BOX 4872**

City **MANCHESTER** State **NH** Zip Code **03108-4872**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STEINER & COMPANY** Occupation **ECONOMIC CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369600**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

14020684455

**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)

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 12 13a 13b 14 15

PAGE 304 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JAMES STELLOS

Mailing Address **P.O. BOX 409**

City **NASHUA** State **NH** Zip Code **03061-0409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STELLOS ELECTRIC** Occupation **ELECTRICAL CONTRACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : SA11.371810

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. PER STENSBY

Mailing Address **P.O. BOX 1736**

City **NEW LONDON** State **NH** Zip Code **03257-1736**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 07 / 2014**

Transaction ID : SA11.370721

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER B. STEPANEK

Mailing Address **18 CHESTNUT HILL ROAD**

City **AMHERST** State **NH** Zip Code **03031-1503**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : SA11.371775

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

14020684456

**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 305 OF 485
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	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN W. STEPHENSON

Mailing Address **22 HOOK ROAD**

City **GILFORD** State **NH** Zip Code **03249-6745**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **335.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.369018**

Amount of Each Receipt this Period
35.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PETER J. STEPHENS

Mailing Address **637 WOODWARD STREET**

City **ORLANDO** State **FL** Zip Code **32803-3915**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARKADEA STRATEGIE** Occupation **MANAGEMENT CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370559**

Amount of Each Receipt this Period
1250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CAMPBELL STEWARD

Mailing Address **65 ASBURY STREET**

City **TOPSFIELD** State **MA** Zip Code **01983-1501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371250**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1785.00**

TOTAL This Period (last page this line number only).....

14020684457

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID E. STOKES

Mailing Address **4502 BRIAR HILL W.**

City **LAFAYETTE HILL** State **PA** Zip Code **19444-1024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 30 / 2014**
Transaction ID : **SA11.369424**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. J. BRIAN BRIAN STONE

Mailing Address **9 TERRACEWOOD ROAD**

City **LONDONDERRY** State **NH** Zip Code **03053-2409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAFE SERVICES INC.** Occupation **FOOD SERVICE MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt **08 / 01 / 2014**
Transaction ID : **SA11.369852**

Amount of Each Receipt this Period **500.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES STRAUCH

Mailing Address **49 N. CALIBOGUE CAY RD**

City **HILTON HEAD** State **SC** Zip Code **29928-2913**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GA SERVICES LLC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 08 / 2014**
Transaction ID : **SA11.367727**

Amount of Each Receipt this Period **1000.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2000.00**

TOTAL This Period (last page this line number only).....

14020684458

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. KEVIN W. STUART

Mailing Address **33 MASSABESIC DRIVE**

City **AUBURN** State **NH** Zip Code **03032-3167**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369834**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY N. STULTZ

Mailing Address **262 DEERFIELD CIRCLE**

City **KINGWOOD** State **WV** Zip Code **26537-1358**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369223**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. STUTT

Mailing Address **P.O. BOX 107**

City **BONDVILLE** State **VT** Zip Code **05340-0107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370422**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

14020684459

**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 308 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. F. C. SULLIVAN

Mailing Address **P.O. BOX 629**

City **PLAISTOW** State **NH** Zip Code **03865-0629**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : **SA11.371672**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH SWEENEY

Mailing Address **18 BEN ARTHURS WAY**

City **DOVER** State **MA** Zip Code **02030-2421**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370731**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT F. SWIFT

Mailing Address **P.O. BOX 125**

City **PLYMOUTH** State **NH** Zip Code **03264-0125**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PLYMOUTH STATE UNIVERSITY** Occupation **PROFESSOR OF MUSIC EMERITUS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 01 / 2014**

Transaction ID : **SA11.370079**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **800.00**

TOTAL This Period (last page this line number only)

14020684460

**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)
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PAGE 309 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT F. SWIFT

Mailing Address **P.O. BOX 125**

City **PLYMOUTH** State **NH** Zip Code **03264-0125**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PLYMOUTH STATE UNIVERSITY** Occupation **PROFESSOR OF MUSIC EMERITUS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.372105**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GERALDINE SYLVESTER

Mailing Address **P.O. BOX 92**

City **NEW CASTLE** State **NH** Zip Code **03854-0092**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371947**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HORACE C. SYLVESTER JR.

Mailing Address **810 MAIN STREET**

City **HINGHAM** State **MA** Zip Code **02043-3630**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368915**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

400.00

14020684461

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. HORACE C. SYLVESTER JR.

Mailing Address **810 MAIN STREET**

City **HINGHAM** State **MA** Zip Code **02043-3630**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371242**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DONNA SYTEK

Mailing Address **34 TOWN VILLAGE DRIVE**

City **SALEM** State **NH** Zip Code **03079-3288**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370445**

Amount of Each Receipt this Period
-250.00
 CONTRIBUTION

CHARGED BACK

C. Full Name (Last, First, Middle Initial)
DR. LUCIAN SZMYD JR.

Mailing Address **41 HARBORVIEW DRIVE**

City **RYE** State **NH** Zip Code **03870-6119**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : **SA11.369837**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

14020684462

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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 Use separate schedule(s) for each category of the Detailed Summary Page
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD F. SZUM
 Mailing Address **P.O. BOX 13538**
 City **AMHERST** State **NH** Zip Code **03031-**
 Date of Receipt **08 / 18 / 2014**
 Transaction ID : **SA11.371788**
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

B. Full Name (Last, First, Middle Initial)
MR. JAMES N. TANIS
 Mailing Address **21 ELLIOT STREET**
 City **EXETER** State **NH** Zip Code **03833-2701**
 Date of Receipt **08 / 20 / 2014**
 Transaction ID : **SA11.371940**
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **RETIRED**
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **500.00**

C. Full Name (Last, First, Middle Initial)
MRS. NANCY TARPLEY
 Mailing Address **P.O. BOX 693**
 City **AMHERST** State **NH** Zip Code **03031-0693**
 Date of Receipt **07 / 11 / 2014**
 Transaction ID : **SA11.368237**
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **RETIRED**
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

SUBTOTAL of Receipts This Page (optional) **1000.00**
TOTAL This Period (last page this line number only)

14020684463

**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 312 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STANLEY TATE

Mailing Address **1175 NE 125TH STREET**
SUITE 102

City **NORTH MIAMI** State **FL** Zip Code **33161-5009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STANLEY TATE BUILDERS** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371967**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DOROTHY L. TAYLOR

Mailing Address **7587 BALTIC DRIVE**

City **VERONA** State **WI** Zip Code **53593-8005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370255**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT W. TAYLOR

Mailing Address **233 ROSS AVENUE**

City **HACKENSACK** State **NJ** Zip Code **07601-2820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369659**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1100.00**

TOTAL This Period (last page this line number only).....

14020684464

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 313 OF 485	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. J. THOMAS TELLE

Mailing Address **680 REMUDA ROAD**

City **FREDERICKSBURG** State **TX** Zip Code **78624-7031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370320**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY L. TEPAS

Mailing Address **2022 CHEVIOT DRIVE**

City **INVERNESS** State **IL** Zip Code **60010-5619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370662**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD R. THEISSEN

Mailing Address **10259 LANCASTER LANE**

City **WOODBURY** State **MN** Zip Code **55129-8507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368334**

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1150.00

14020684465

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 314 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DONALD R. THEISSEN

Mailing Address **10259 LANCASTER LANE**

City **WOODBURY** State **MN** Zip Code **55129-8507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : **SA11.371170**

Amount of Each Receipt this Period
75.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID THIBODEAU

Mailing Address **436 GOULD HILL ROAD**

City **HOPKINTON** State **NH** Zip Code **03229-2808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : **SA11.367566**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LAWRENCE THIBODEAU

Mailing Address **4 FAIR OAKS DRIVE**

City **AMHERST** State **NH** Zip Code **03031-1632**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAMPSHIRE FIRE PROTECTION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2014

Transaction ID : **SA11.371099**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **825.00**

TOTAL This Period (last page this line number only)

14020684466

**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 315 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BYRON A. THOMAS

Mailing Address **2407 WROXTON ROAD**

City **HOUSTON** State **TX** Zip Code **77005-1435**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 26 / 2014

Transaction ID : **SA11.369134**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CYNTHIA THOMAS

Mailing Address **3132 DEL OCEANO DR**

City **LAFAYETTE** State **CA** Zip Code **94549-2038**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2014

Transaction ID : **SA11.369160**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JILL THOMAS

Mailing Address **1516 S. BOSTON AVE.**

City **TULSA** State **OK** Zip Code **74119-4003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : **SA11.369310**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2850.00**

TOTAL This Period (last page this line number only).....

14020684467

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LYN THOMAS JR.

Mailing Address **700 N. DOBSON ROAD UNIT 31**

City **CHANDLER** State **AZ** Zip Code **85224-6940**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRONFER EQUIPMENT INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SA11.369193**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT THOMAS

Mailing Address **1516 S. BOSTON AVE.**

City **TULSA** State **OK** Zip Code **74119-4003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SENIOR STAR** Occupation **CO-OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
07 / 29 / 2014

Transaction ID : **SA11.369311**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS THOMAS

Mailing Address **5619 BORDLEY DRIVE**

City **HOUSTON** State **TX** Zip Code **77056-2329**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368691**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **4100.00**

TOTAL This Period (last page this line number only).....

14020684468

**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 317 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHARLES I. THOMPSON

Mailing Address **475 W. 12TH AVENUE**
UNIT 10A

City **DENVER** State **CO** Zip Code **80204-3687**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370784**

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LINCOLN THOMPSON JR.

Mailing Address **142 N. COVE ROAD**

City **OLD SAYBROOK** State **CT** Zip Code **06475-2560**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VIRGINIA INDUSTRIES** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370457**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM THOMPSON

Mailing Address **204 MANDALAY**

City **SAN MARCOS** State **TX** Zip Code **78666-3631**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371159**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1450.00

1402068469

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 318 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JOHN THONET

Mailing Address **60 NORTH AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL, INC.** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368471**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN THONET

Mailing Address **60 NORTH AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL, INC.** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368700**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA THONET

Mailing Address **60 NORTH AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL, INC.** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368470**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684470

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)

11a 11b 11c 11d 12 13a 13b 14 15

PAGE 319 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA THONET

Mailing Address **60 NORTH AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL, INC.** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.372885**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK E. THURSTON

Mailing Address **509 SANBORN ROAD**
P.O. BOX 97

City **SANBORNTON** State **NH** Zip Code **03269-2418**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.372000**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER H. TIBBETTS

Mailing Address **301 OLD MARLBOROUGH ROAD**

City **DUBLIN** State **NH** Zip Code **03444-8310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FERRITE MICROWAVE TECHNOLOGIES, LLC** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369502**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00

14020684471

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. CONSTANCE E. TIPTON

Mailing Address **712 E. CAPITOL STREET NE**

City **WASHINGTON** State **DC** Zip Code **20003-1344**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INTERNATIONAL DAIRY FOODS ASSOCIATION** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
07 / 09 / 2014

Transaction ID : **SA11.368031**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WOODBURY C. TITCOMB

Mailing Address **4901 GULF SHORE BLVD. N.
MERIDIAN CLUB, NO. 1104**

City **NAPLES** State **FL** Zip Code **34103-2223**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SA11.368571**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WOODBURY C. TITCOMB

Mailing Address **4901 GULF SHORE BLVD. N.
MERIDIAN CLUB, NO. 1104**

City **NAPLES** State **FL** Zip Code **34103-2223**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SA11.371054**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2500.00**

TOTAL This Period (last page this line number only).....

14020684472

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 321 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. BRUCE E. TOLL

Mailing Address **250 GIBRALTAR ROAD**

City **HORSHAM** State **PA** Zip Code **19044-2323**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOLL BROTHERS, INC.** Occupation **DEVELOPER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368687**

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANTHONY TOPAZI

Mailing Address **7341 KINGS MTN ROAD**

City **VESTAVIA** State **AL** Zip Code **35242-2596**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt **07 / 15 / 2014**

Transaction ID : **SA11.368413**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY TOPAZI

Mailing Address **7341 KINGS MTN ROAD**

City **VESTAVIA** State **AL** Zip Code **35242-2596**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : **SA11.369409**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **3250.00**

TOTAL This Period (last page this line number only)

14020684473

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 322 OF 485	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. LYDIA PRIO TOUZET

Mailing Address **4900 LAKE LANE**

City **CORAL GABLES** State **FL** Zip Code **33156-2255**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : SA11.371997

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CECELIA A. TRIPI

Mailing Address **24 DUMPLING COVE**

City **NEWINGTON** State **NH** Zip Code **03801-2752**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 01 / 2014

Transaction ID : SA11.369842

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVEN L. TRULASKE

Mailing Address **301 CANNONBALL LANE**

City **OFALLON** State **MO** Zip Code **63366-4531**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TRUE MANUFACTURING** Occupation **MANUFACTURING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : SA11.370664

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

14020684474

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 323 OF 485
 Use separate schedule(s) for each category of the Detailed Summary Page
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DONALD J. TRUMP

Mailing Address **725 5TH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-2519**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SA11.370684**

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEVIN B. VANN

Mailing Address **3 CHATEAU DRIVE**

City **SOUTH HADLEY** State **MA** Zip Code **01075-7504**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE VANN GROUP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370325**

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES VARNELL

Mailing Address **112 MILL PARK CHASE**

City **WOODSTOCK** State **GA** Zip Code **30188-2643**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JAMES H VARNELL INC** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370245**

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2800.00

14020684475

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 324 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
GEORGE VASVATEKIS

Mailing Address **P.O. BOX 293**

City **BRIDGEWATER** State **MA** Zip Code **02324-0293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE NIKOLAOS GROUP, INC** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **MM / DD / YYYY**
07 / 01 / 2014

Transaction ID : **SA11.367201**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GEORGE VASVATEKIS

Mailing Address **P.O. BOX 293**

City **BRIDGEWATER** State **MA** Zip Code **02324-0293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE NIKOLAOS GROUP, INC** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **MM / DD / YYYY**
08 / 16 / 2014

Transaction ID : **SA11.371475**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE VASVATEKIS

Mailing Address **P.O. BOX 293**

City **BRIDGEWATER** State **MA** Zip Code **02324-0293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE NIKOLAOS GROUP, INC** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **MM / DD / YYYY**
08 / 16 / 2014

Transaction ID : **SA11.371475B**

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional)..... **5200.00**

TOTAL This Period (last page this line number only).....

14020684476

**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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 325 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
GEORGE VASVATEKIS

Mailing Address **P.O. BOX 293**

City **BRIDGEWATER** State **MA** Zip Code **02324-0293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE NIKOLAOS GROUP, INC** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 16 / 2014

Transaction ID : **SA11.373653**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. GEORGE C. VAUGHAN

Mailing Address **217 BURR ROAD**

City **SAN ANTONIO** State **TX** Zip Code **78209-5903**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VAUGHAN & SONS, INC.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370441**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD H. VAUGHAN

Mailing Address **P.O. BOX 458**

City **WILSON** State **WY** Zip Code **83014-0458**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : **SA11.368309**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1000.00**

TOTAL This Period (last page this line number only).....

1402068447

**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)

11a 11b 11c 11d

12 13a 13b 14 15

PAGE 326 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. LEO A. VECELLIO JR.

Mailing Address **120 JUNGLE ROAD**

City **PALM BEACH** State **FL** Zip Code **33480-4810**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VECELLIO GROUP, INC.** Occupation **CORPORATE EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA11.368576**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. EMILE E. VERMETTE

Mailing Address **457 SOUTH MAIN STREET**

City **NASHUA** State **NH** Zip Code **03060-5007**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371789**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ACIE L. VICKERS

Mailing Address **9441 NEWBRIDGE DRIVE**

City **POTOMAC** State **MD** Zip Code **20854-4460**

FEC ID number of contributing federal political committee. **C**

Name of Employer **H.T.L.** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369690**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2000.00

14020684478

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 485
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STEVEN WALKER

Mailing Address **128 ELM HILL ROAD**

City **PETERBOROUGH** State **NH** Zip Code **03458-1936**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11.370223**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRIAN F. WARD

Mailing Address **4 DERBY LANE**

City **MEDFIELD** State **MA** Zip Code **02052-1330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **S.V.P., CORPORATE RISK MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369505**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRADFORD WARNER

Mailing Address **19 KRESS FARM RD**

City **HINGHAM** State **MA** Zip Code **02043-2911**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 15 / 2014

Transaction ID : **SA11.368412**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

14020684479

**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 328 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CLIFFORD WASHER

Mailing Address **2 GREAT ROAD**

City **BEDFORD** State **MA** Zip Code **01730-2106**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368268**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EARLE B. WASON

Mailing Address **91 W. BAY ROAD**

City **FREEDOM** State **NH** Zip Code **03836-4500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369593**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHEAL WATFORD

Mailing Address **2 VILLEROY WAY**

City **THE WOODLANDS** State **TX** Zip Code **77382-2711**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ULTRA PETROLEUM CORPORATION** Occupation **OIL & GAS MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
07 / 11 / 2014

Transaction ID : **SA11.368120**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

1402068480

**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)

11a 11b 11c 11d 12 13a 13b 14 15

PAGE 329 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JAMES FRANKLIN WATKINS III

Mailing Address **175 GARLAND ROAD**

City **RYE** State **NH** Zip Code **03870-2541**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MIDWAY EXCAVATORS, INC.** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368536**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WILLIAM R. WEAVER

Mailing Address **1845 WOODALL RODGERS FREEWAY SUITE 1275**

City **DALLAS** State **TX** Zip Code **75201-2299**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt **07 / 23 / 2014**

Transaction ID : **SA11.368778**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM R. WEAVER

Mailing Address **1845 WOODALL RODGERS FREEWAY SUITE 1275**

City **DALLAS** State **TX** Zip Code **75201-2299**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt **08 / 19 / 2014**

Transaction ID : **SA11.368778B**

Amount of Each Receipt this Period **-1000.00**

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

14020684481

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. WILLIAM R. WEAVER

Mailing Address **1845 WOODALL RODGERS FREEWAY**
SUITE 1275

City **DALLAS** State **TX** Zip Code **75201-2299**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.373582**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MR. ROBERT K. WEILER

Mailing Address **101 PLAIN ROAD**

City **WAYLAND** State **MA** Zip Code **01778-2420**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ORACLE** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369508**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT K. WEILER

Mailing Address **101 PLAIN ROAD**

City **WAYLAND** State **MA** Zip Code **01778-2420**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ORACLE** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
08 / 19 / 2014

Transaction ID : **SA11.369508B**

Amount of Each Receipt this Period
-2600.00
CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5200.00

14020684482

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
MR. ROBERT K. WEILER

Mailing Address **101 PLAIN ROAD**

City State Zip Code
WAYLAND MA 01778-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ORACLE EXECUTIVE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SA11.373606**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION
**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

Full Name (Last, First, Middle Initial)
MR. JAMES O. WELCH JR.

Mailing Address **165 OLD SHORT HILLS ROAD**

City State Zip Code
SHORT HILLS NJ 07078-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
07 / 23 / 2014

Transaction ID : **SA11.368954**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MS. CAROL D. WELLS

Mailing Address **7 BERKLEY LANE**

City State Zip Code
SAINT LOUIS MO 63124-2001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370838**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

500.00

TOTAL This Period (last page this line number only).....

14020684483

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 332 OF 485	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. L. ROB WERNER

Mailing Address

City State Zip Code
BIG BEAR LAKE CA 92315-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : SA11.368254

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. WESSON

Mailing Address **536 EDGEWATER DRIVE**

City State Zip Code
GILFORD NH 03249-6681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : SA11.368591

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. FLORENCE F. WHEELER

Mailing Address **10 N. MAYFLOWER ROAD**

City State Zip Code
LAKE FOREST IL 60045-2421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 11 / 2014

Transaction ID : SA11.368164

Amount of Each Receipt this Period
600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

14020684484

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 333 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. STEVEN WHEELWRIGHT

Mailing Address **55-220 KULANUI STREET**

City **LAIE** State **HI** Zip Code **96762-1293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BYU-H** Occupation **ADMINISTRATION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 23 / 2014**
Transaction ID : **SA11.368955**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM B. WHITING

Mailing Address **245 GALLOPING HILL ROAD**

City **CONTOOCCOOK** State **NH** Zip Code **03229-3402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **07 / 23 / 2014**
Transaction ID : **SA11.368818**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM B. WHITING

Mailing Address **245 GALLOPING HILL ROAD**

City **CONTOOCCOOK** State **NH** Zip Code **03229-3402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **08 / 01 / 2014**
Transaction ID : **SA11.370060**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **700.00**

TOTAL This Period (last page this line number only).....

14020684485

**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)

11a 11b 11c 11d

12 13a 13b 14 15

PAGE 334 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. SUZANNE WHITNEY

Mailing Address **5 GROUSE LANE**

City **MERRIMACK** State **NH** Zip Code **03054-2876**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **ADVOCATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368835**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. WHITNEY

Mailing Address **72 ELM STREET**

City **SOUTH DARTMOUTH** State **MA** Zip Code **02748-3802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370775**

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KURT R. WICKS

Mailing Address **45 OLDE ENGLISH ROAD**

City **BEDFORD** State **NH** Zip Code **03110-5621**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALLSTATE INSURANCE** Occupation **AGENCY OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 07 / 2014

Transaction ID : **SA11.370869**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3050.00

14020684486

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 335 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. SAMUEL J. WIEGAND

Mailing Address **6584 CHAMPETRE COURT**

City **RENO** State **NV** Zip Code **89511-5077**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372027**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. E. ANDREW WILDE

Mailing Address **1210 GRENDAL AVENUE #E-3**

City **NEEDHAM** State **MA** Zip Code **02492-4630**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA11.368510**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND G. WILE

Mailing Address **2106 HORNES LAKE ROAD**

City **WILLIAMSBURG** State **VA** Zip Code **23185-7510**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA11.369441**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1350.00**

TOTAL This Period (last page this line number only).....

14020684487

**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 336 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. BETSY WILLEY

Mailing Address 536 CENTRAL RD
P.O. BOX 487

City RYE BEACH State NH Zip Code 03871-0487

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : SA11.371196

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES WILLEY

Mailing Address 536 CENTRAL RD
P.O. BOX 487

City RYE BEACH State NH Zip Code 03871-0487

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 14 / 2014

Transaction ID : SA11.371202

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARTHA B. WILLIS

Mailing Address 25 SPRAY AVENUE

City MARBLEHEAD State MA Zip Code 01945-2746

FEC ID number of contributing federal political committee. **C**

Name of Employer OPPENHEIMER FUNDS Occupation C.M.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
08 / 20 / 2014

Transaction ID : SA11.371942

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684488

**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 337 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ERIC R. WILSON

Mailing Address **60 INDIAN ROCK ROAD**

City **NASHUA** State **NH** Zip Code **03063-1318**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371772**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANSOM WILSON

Mailing Address **1050 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10028-1031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DEUTSCHE BANK** Occupation **DISABLED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SA11.371867**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT BRUCE WILSON

Mailing Address **56 SETON DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-5129**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371529**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

14020684489

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. GINAT WINTERMEYER MIROWSKI

Mailing Address **10440 HIGH GROVE DRIVE**

City **CARMEL** State **IN** Zip Code **46032-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372084**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. GINAT WINTERMEYER MIROWSKI

Mailing Address **10440 HIGH GROVE DRIVE**

City **CARMEL** State **IN** Zip Code **46032-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372084B**

Amount of Each Receipt this Period
-2400.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
DR. GINAT WINTERMEYER MIROWSKI

Mailing Address **10440 HIGH GROVE DRIVE**

City **CARMEL** State **IN** Zip Code **46032-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.373677**

Amount of Each Receipt this Period
2400.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

SUBTOTAL of Receipts This Page (optional)..... **5000.00**

TOTAL This Period (last page this line number only)..... **5000.00**

14020684490

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 339 OF 485	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MRS. ANNE B.R. WITHERBY

Mailing Address **10 LONGWOOD DRIVE**
APARTMENT 461

City **WESTWOOD** State **MA** Zip Code **02090-1146**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370772**

Amount of Each Receipt this Period
350.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT WOFCHUCK

Mailing Address **17 PEABODY DRIVE**

City **BRENTWOOD** State **NH** Zip Code **03833-6424**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371793**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SAMUEL WOLCOTT

Mailing Address **384 DUCK POND ROAD**

City **LOCUST VALLEY** State **NY** Zip Code **11560-2405**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 30 / 2014

Transaction ID : **SA11.369790**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

14020684491

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 340 OF 485	
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. RICHARD M. WOLF

Mailing Address **P.O. BOX 837**
33 BANTRY LANE

City **BREWSTER** State **MA** Zip Code **02631-0837**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : SA11.371419

Amount of Each Receipt this Period
380.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN BASSIST WOLF

Mailing Address **P.O. BOX 268**

City **TYLER** State **TX** Zip Code **75710-0268**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : SA11.370153

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ROSALYN K. WOOD

Mailing Address **PO BOX 367**

City **ANDOVER** State **MA** Zip Code **01810-0007**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VOLUNTEER **VOLUNTEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : SA11.369211

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3230.00

14020684492

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)

11a 11b 11c 11d
 12 13a 13b 14 15

PAGE 341 OF 485

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C. WRIGHT

Mailing Address **610 FIFTH AVENUE**
SUITE 605

City **NEW YORK** State **NY** Zip Code **10020-2403**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
07 / 23 / 2014

Transaction ID : **SA11.368792**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SARAH LOUIS WRIGHT

Mailing Address **3416 GOSHEN ROAD**

City **NEWTOWN SQUARE** State **PA** Zip Code **19073-3424**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371944**

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FREDERICK J. WUENSCHEL

Mailing Address **7146 ROLLING MEADOWS DRIVE**

City **NORTH TONAWANDA** State **NY** Zip Code **14120-0009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONTRACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371901**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5450.00**

TOTAL This Period (last page this line number only).....

14020684493

**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 342 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) MS. MARY A. WUTKE		Date of Receipt MM / DD / YYYY 08 / 02 / 2014
Mailing Address 6 SHEFFORD CIRCLE		Transaction ID : SA11.369876
City MADISON	State WI	Zip Code 53719-1415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation FINANCE	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) MS. MARY A. WUTKE		Date of Receipt MM / DD / YYYY 08 / 20 / 2014
Mailing Address 6 SHEFFORD CIRCLE		Transaction ID : SA11.372031
City MADISON	State WI	Zip Code 53719-1415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation FINANCE	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) MR. C. PETER WYLLIE		Date of Receipt MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1320 HONEYSUCKLE DRIVE		Transaction ID : SA11.370340
City WATKINSVILLE	State GA	Zip Code 30677-6609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

14020684494

**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 343 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JIM XHEMA

Mailing Address **P.O. BOX 4422**

City **GREENWICH** State **CT** Zip Code **06831-0408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONTRACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371353**

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP L. YARBROUGH

Mailing Address **1008 LOGANBERRY COURT**

City **FUQUAY VARINA** State **NC** Zip Code **27526-2622**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11.371355**

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD YEATON

Mailing Address **68 CRANFIELD STREET**

City **NEW CASTLE** State **NH** Zip Code **03854-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.371957**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

14020684495

**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 344 OF 485
	<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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MS. CHERLYN ZAZZARINO

Mailing Address **37640 S. TERRACE PARK DRIVE**

City **TUCSON** State **AZ** Zip Code **85739-2211**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : **SA11.369120**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRED ZEIDMAN

Mailing Address **3719 OLYMPIA DRIVE**

City **HOUSTON** State **TX** Zip Code **77019-3029**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 09 / 2014

Transaction ID : **SA11.368040**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM G. ZIMMERMAN JR.

Mailing Address **126 HILLTOP PLACE**

City **NEW LONDON** State **NH** Zip Code **03257-5412**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
08 / 06 / 2014

Transaction ID : **SA11.370792**

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

14020684496

**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 345 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
DR. WILLIAM G. ZIMMERMAN JR.

Mailing Address **126 HILLTOP PLACE**

City **NEW LONDON** State **NH** Zip Code **03257-5412**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **08 / 20 / 2014**

Transaction ID : **SA11.372098**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN R. ZYNDA

Mailing Address **P.O. BOX 40**

City **WILLIAMSTON** State **MI** Zip Code **48895-0040**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CARDINAL FABRICATING, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **08 / 06 / 2014**

Transaction ID : **SA11.370573**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALLAN SAULNIER L.L.C.

Mailing Address **81 LITCHFIELD ROAD**

City **LONDONDERRY** State **NH** Zip Code **03053-2622**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 24 / 2014**

Transaction ID : **SA11.369095**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

SUBTOTAL of Receipts This Page (optional)..... **600.00**

TOTAL This Period (last page this line number only).....

14020684497

**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 346 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
LAW OFFICES OF PETER E. HUTCHINS PLLC

Mailing Address **814 ELM STREET SUITE 200**

City **MANCHESTER** State **NH** Zip Code **03101-2130**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371550**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

B. Full Name (Last, First, Middle Initial)
UC FUND MANAGEMENT II, LLC

Mailing Address **745 BOYLSTON STREET, SUITE 502**

City **BOSTON** State **MA** Zip Code **02116-2658**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11.372271**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

C. Full Name (Last, First, Middle Initial)
WINCHESTER MECHANICAL, LLC

Mailing Address **20 TRAFALGAR SQUARE, SUITE 109**

City **NASHUA** State **NH** Zip Code **03063-1973**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 18 / 2014

Transaction ID : **SA11.371549**

Amount of Each Receipt this Period
500.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

693202.00

14020684498

**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 347 OF 485
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
FRIENDS OF GEORGE LEMIEUX

Mailing Address **2640A MITCHAM DRIVE**

City **TALLAHASSEE** State **FL** Zip Code **32308-5400**

FEC ID number of contributing federal political committee. **C00494971**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 MM / DD / YYYY
07 / 03 / 2014

Transaction ID : **SA11.367563**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

CHECK RETURNED BY BANK

B. Full Name (Last, First, Middle Initial)
DENALI LEADERSHIP PAC

Mailing Address **2755 ILLIAMNA AVENUE**

City **ANCHORAGE** State **AK** Zip Code **99517-1217**

FEC ID number of contributing federal political committee. **C00438291**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SA11.368358**

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENALI LEADERSHIP PAC

Mailing Address **2755 ILLIAMNA AVENUE**

City **ANCHORAGE** State **AK** Zip Code **99517-1217**

FEC ID number of contributing federal political committee. **C00438291**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA11.371547**

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2400.00

14020684499

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
DEVON ENERGY CORPORATION PAC

Mailing Address **333 W. SHERIDAN AVENUE**

City State Zip Code
OKLAHOMA CITY OK 73102-5010

FEC ID number of contributing federal political committee. **C C00354753**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 / /
08 / 08 / 2014

Transaction ID : **SA11.371080**

Amount of Each Receipt this Period

5000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
FRANCHISING PAC

Mailing Address **1501 K. STREET N.W.
SUITE 350**

City State Zip Code
WASHINGTON DC 20005-1412

FEC ID number of contributing federal political committee. **C C00084491**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 / /
08 / 14 / 2014

Transaction ID : **SA11.371213**

Amount of Each Receipt this Period

2500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
IPAA WILDCATTERS FUND

Mailing Address **1201 15TH STREET NW
SUITE 300**

City State Zip Code
WASHINGTON DC 20005-2842

FEC ID number of contributing federal political committee. **C C00246306**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 / /
08 / 14 / 2014

Transaction ID : **SA11.371214**

Amount of Each Receipt this Period

5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

12500.00

TOTAL This Period (last page this line number only).....

12500.00

14020684500

**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 349 OF 485
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JOHN BOLTON PAC

Mailing Address **610 S. BOULEVARD**

City **TAMPA** State **FL** Zip Code **33606-2693**

FEC ID number of contributing federal political committee. **C C00542431**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370204**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN BOLTON PAC

Mailing Address **610 S. BOULEVARD**

City **TAMPA** State **FL** Zip Code **33606-2693**

FEC ID number of contributing federal political committee. **C C00542431**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA11.370213**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LINCOLN PAC

Mailing Address **P.O. BOX A3968**

City **CHICAGO** State **IL** Zip Code **60690-3968**

FEC ID number of contributing federal political committee. **C C00491241**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SA11.369501**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

15000.00

14020684501

**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 350 OF 485
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE CO. PAC

Mailing Address **1295 STATE STREET**

City **SPRINGFIELD** State **MA** Zip Code **01111-0001**

FEC ID number of contributing federal political committee. **C C00118943**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **08 / 18 / 2014**

Transaction ID : **SA11.371548**

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRINTING INDUSTRIES OF AMERICA PAC (PRINTPAC)

Mailing Address **601 13TH STREET NW SUITE 350S**

City **WASHINGTON** State **DC** Zip Code **20005-3861**

FEC ID number of contributing federal political committee. **C C00018028**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **08 / 14 / 2014**

Transaction ID : **SA11.371215**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RECLAIM AMERICA PAC

Mailing Address **138 CONANT STREET C/O RED CURVE SOLUTIONS**

City **BEVERLY** State **MA** Zip Code **01915-1665**

FEC ID number of contributing federal political committee. **C C00500025**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **08 / 07 / 2014**

Transaction ID : **SA11.370599**

Amount of Each Receipt this Period
10000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

16000.00

14020684502

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 OF 485
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
RECLAIM AMERICA PAC

Mailing Address **138 CONANT STREET**
C/O RED CURVE SOLUTIONS

City **BEVERLY** State **MA** Zip Code **01915-1665**

FEC ID number of contributing federal political committee. **C C00500025**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370599B**

Amount of Each Receipt this Period
-5000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
RECLAIM AMERICA PAC

Mailing Address **138 CONANT STREET**
C/O RED CURVE SOLUTIONS

City **BEVERLY** State **MA** Zip Code **01915-1665**

FEC ID number of contributing federal political committee. **C C00500025**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.371130**

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
THE ALAMO PAC

Mailing Address **919 CONGRESS AVENUE STE. 1400**

City **AUSTIN** State **TX** Zip Code **78701-2114**

FEC ID number of contributing federal political committee. **C C00387464**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SA11.370621**

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

5000.00

14020684503

**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 352 OF 485
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
THE HAWKEYE PAC

Mailing Address **P.O. BOX 192**

City **DES MOINES** State **IA** Zip Code **50301-0192**

FEC ID number of contributing federal political committee. **C C00379479**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SA11.368356**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE SENATE VICTORY FUND, PAC

Mailing Address **P.O. BOX 7274**

City **TUPELO** State **MS** Zip Code **38802-7274**

FEC ID number of contributing federal political committee. **C C00202861**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SA11.368359**

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TYCO EMPLOYEES PAC

Mailing Address **9 ROSZEL ROAD**

City **PRINCETON** State **NJ** Zip Code **08540-6205**

FEC ID number of contributing federal political committee. **C C00113753**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SA11.368357**

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12500.00

14020684504

**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 353 OF 485
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
WESTERN ENERGY ALLIANCE PAC

Mailing Address **1775 SHERMAN STREET STE. 2700**

City **DENVER** State **CO** Zip Code **80203-4351**

FEC ID number of contributing federal political committee. **C C00426569**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **07 / 24 / 2014**

Transaction ID : **SA11.369094**

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **5000.00**

TOTAL This Period (last page this line number only) **68400.00**

14020684505

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
BROWN VICTORY COMMITTEE

Mailing Address **228 S. WASHINGTON ST
STE. 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00532853**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
143037.69

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : **SA12.370881**

Amount of Each Receipt this Period

16189.99

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
MR. CHARLES CLOUGH

Mailing Address **649 SUDBURY ROAD**

City **CONCORD** State **MA** Zip Code **01742-4309**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLOUGH CAPITAL PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA12.370888**

Amount of Each Receipt this Period

2600.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. MARK COHEN

Mailing Address **125 CHESTNUT STREET**

City **CONCORD** State **MA** Zip Code **01742-2646**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OFFICE PAPER RECOVERY SYSTEMS, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : **SA12.370886**

Amount of Each Receipt this Period

2600.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

16189.99

TOTAL This Period (last page this line number only).....

16189.99

14020684506

**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 355 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. JONATHON S. JACOBSON

Mailing Address **14 HIGHFIELDS ROAD**

City **WAYLAND** State **MA** Zip Code **01778-2816**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STRATEGIC GRANT PARTNERS** Occupation **PHILANTHROPY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 30 / 2014**
Transaction ID : **SA12.370887**

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: **BROWN VICTORY CMTE.**
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
RICHARD MONAGHAN

Mailing Address **2 ALEXANDER WAY**

City **HINGHAM** State **MA** Zip Code **02043-1952**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 14 / 2014**
Transaction ID : **SA12.370884**

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: **BROWN VICTORY CMTE.**
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. JAMES MURPHY

Mailing Address **11 BARN SWALLOW LANE**

City **DUXBURY** State **MA** Zip Code **02332-3628**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW ENGLAND REALTY RESOURCES, INC** Occupation **COMMERCIAL MORTGAGE BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 14 / 2014**
Transaction ID : **SA12.370882**

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: **BROWN VICTORY CMTE.**
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) **0.00**

TOTAL This Period (last page this line number only)

14020684507

**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 356 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. WARREN C. SMITH JR.

Mailing Address **38 COOLIDGE LANE**

City **DEDHAM** State **MA** Zip Code **02026-5805**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STALEY CAPITAL** Occupation **INVESTMENT MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
07 / 15 / 2014

Transaction ID : **SA12.370885**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CATHERINE WHITE

Mailing Address **35 WINDSOR ST.**

City **DUXBURY** State **MA** Zip Code **02332-4500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SA12.370883**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BROWN VICTORY COMMITTEE

Mailing Address **228 S. WASHINGTON ST
STE. 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00532853**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **143037.69**

Date of Receipt
 MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SA12.370889**

Amount of Each Receipt this Period
15821.38

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

15821.38

14020684508

**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 357 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. CHARLES CLOUGH

Mailing Address **649 SUDBURY ROAD**

City **CONCORD** State **MA** Zip Code **01742-4309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CLOUGH CAPITAL** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA12.370896**

Amount of Each Receipt this Period
2400.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. MARK COHEN

Mailing Address **125 CHESTNUT STREET**

City **CONCORD** State **MA** Zip Code **01742-2646**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OFFICE PAPER RECOVERY SYSTEMS, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : **SA12.370894**

Amount of Each Receipt this Period
2400.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. JONATHON S. JACOBSON

Mailing Address **14 HIGHFIELDS ROAD**

City **WAYLAND** State **MA** Zip Code **01778-2816**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STRATEGIC GRANT PARTNERS** Occupation **PHILANTHROPY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA12.370895**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684509

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
RICHARD MONAGHAN

Mailing Address **2 ALEXANDER WAY**

City **HINGHAM** State **MA** Zip Code **02043-1952**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 14 / 2014**
Transaction ID : SA12.370892

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: BROWN VICTORY CMTE.
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. JAMES MURPHY

Mailing Address **11 BARN SWALLOW LANE**

City **DUXBURY** State **MA** Zip Code **02332-3628**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW ENGLAND REALTY RESOURCES, INC** Occupation **COMMERCIAL MORTGAGE BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 14 / 2014**
Transaction ID : SA12.370890

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: BROWN VICTORY CMTE.
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. WARREN C. SMITH JR.

Mailing Address **38 COOLIDGE LANE**

City **DEDHAM** State **MA** Zip Code **02026-5805**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STALEY CAPITAL** Occupation **INVESTMENT MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **07 / 15 / 2014**
Transaction ID : SA12.370893

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: BROWN VICTORY CMTE.
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684510

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 OF 485

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input checked="" 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)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

CATHERINE WHITE

Mailing Address 35 WINDSOR ST.

City State Zip Code
DUXBURY MA 02332-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2014

Transaction ID : SA12.370891

Amount of Each Receipt this Period

2600.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

BROWN VICTORY COMMITTEE

Mailing Address 228 S. WASHINGTON ST
STE. 115

City State Zip Code
ALEXANDRIA VA 22314-5404

FEC ID number of contributing federal political committee. **C** C00532853

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
143037.69

Date of Receipt

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SA12.372242

Amount of Each Receipt this Period

14480.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name (Last, First, Middle Initial)

LEONARD BAXT

Mailing Address 2728 1/2 CHAIN BRIDGE RD NW

City State Zip Code
WASHINGTON DC 20016-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : SA12.372247

Amount of Each Receipt this Period

1000.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

14480.00

TOTAL This Period (last page this line number only).....

14020684511

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
ERIC BROCK

Mailing Address **57 AUDUBON RD.**

City State Zip Code
WELLESLEY MA 02481-2826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLOUGH CAPITAL PARTNER

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000.00**

Date of Receipt
 MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SA12.372246**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
LAURA DOMINSKI

Mailing Address **1015 SUNSET RD.**

City State Zip Code
WINNETKA IL 60093-3622

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORTON GROVE COMMUNITY CHURCH PASTOR

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
08 / 12 / 2014

Transaction ID : **SA12.372249**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
MATTHEW DOMINSKI

Mailing Address **1015 SUNSET RD.**

City State Zip Code
WINNETKA IL 60093-3622

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
08 / 12 / 2014

Transaction ID : **SA12.372248**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

14020684512

**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 361 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
BRANDON GARDNER

Mailing Address **337 1ST STREET**

City **BROOKLYN** State **NY** Zip Code **11215-1905**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE RAINE GROUP LLC** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
08 / 12 / 2014

Transaction ID : **SA12.372250**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BRIAN GOLDMAN

Mailing Address **150 EAST 69TH STREET
8E**

City **NEW YORK** State **NY** Zip Code **10021-5704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEWMARK GRUBB KNIGHT FRANK** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
08 / 14 / 2014

Transaction ID : **SA12.372252**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JOHN GRADY JR.

Mailing Address **5 ROCKY RUN**

City **HINGHAM** State **MA** Zip Code **02043-3177**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MOELIS & COMPANY** Occupation **SENIOR ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SA12.372253**

Amount of Each Receipt this Period
500.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684513

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. DAVID G. MUGAR

Mailing Address **222 BERKELEY STREET**

City **BOSTON** State **MA** Zip Code **02116-3748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PRIVATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : **SA12.372245**

Amount of Each Receipt this Period
2600.00
 JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JEFFREY SINE

Mailing Address **205 EAST 8TH STREET
PH2CD**

City **NEW YORK** State **NY** Zip Code **10009-5210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE RAINE GROUP LLC** Occupation **INVESTMENT BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2014

Transaction ID : **SA12.372251**

Amount of Each Receipt this Period
2600.00
 JFC ATTRIB: BROWN VICTORY CMTE.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BROWN VICTORY COMMITTEE

Mailing Address **228 S. WASHINGTON ST
STE. 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00532853**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **143037.69**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : **SA12.372254**

Amount of Each Receipt this Period
10240.00
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional).....

10240.00

TOTAL This Period (last page this line number only).....

14020684514

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 485
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
ERIC BROCK

Mailing Address **57 AUDUBON RD.**

City **WELLESLEY** State **MA** Zip Code **02481-2826**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CLOUGH CAPITAL** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **08 / 04 / 2014**

Transaction ID : **SA12.372258**

Amount of Each Receipt this Period **2400.00**

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
LAURA DOMINSKI

Mailing Address **1015 SUNSET RD.**

City **WINNETKA** State **IL** Zip Code **60093-3622**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MORTON GROVE COMMUNITY CHURCH** Occupation **PASTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 12 / 2014**

Transaction ID : **SA12.372260**

Amount of Each Receipt this Period **2600.00**

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MATTHEW DOMINSKI

Mailing Address **1015 SUNSET RD.**

City **WINNETKA** State **IL** Zip Code **60093-3622**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 12 / 2014**

Transaction ID : **SA12.372259**

Amount of Each Receipt this Period **2600.00**

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) **0.00**

TOTAL This Period (last page this line number only)

14020684515

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 485

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input checked="" 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)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

MR. DAVID G. MUGAR

Mailing Address **222 BERKELEY STREET**

City **BOSTON** State **MA** Zip Code **02116-3748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PRIVATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SA12.372257**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

JEFFREY SINE

Mailing Address **205 EAST 8TH STREET**

PH2CD

City **NEW YORK** State **NY** Zip Code **10009-5210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE RAINE GROUP LLC** Occupation **INVESTMENT BANKER**

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **5200.00**

Date of Receipt
MM / DD / YYYY
08 / 12 / 2014

Transaction ID : **SA12.372261**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **BROWN VICTORY CMTE.**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

GOP VICTORY FUND 2014

Mailing Address **228 S. WASHINGTON ST.**

STE. 115

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C** **C00563130**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **188121.94**

Date of Receipt
MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SA12.370906**

Amount of Each Receipt this Period
46345.99

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional).....

46345.99

TOTAL This Period (last page this line number only).....

14020684516

**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 365 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
CRAIG E. ANGELO

Mailing Address **400 E. MILL PLAIN BLVD.
STE. 500**

City **VANCOUVER** State **WA** Zip Code **98660-3492**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE ALANGELO CO.** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 29 / 2014**

Transaction ID : **SA12.370914**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
PAMELA BREWSTER

Mailing Address **1095 NATINA ST.**

City **SAN FRANCISCO** State **CA** Zip Code **94103-2553**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA12.370915**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
DOUGLAS BURGUM

Mailing Address **10 TALLGRASS TRAIL**

City **HORACE** State **ND** Zip Code **58047-9548**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ENTREPRENEUR** Occupation **ENTREPRENEUR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA12.370947**

Amount of Each Receipt this Period **2600.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684517

**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 366 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PRESTON BUTCHER

Mailing Address **4000 EAST THIRD AVE.
STE. 600**

City **FOSTER CITY** State **CA** Zip Code **94404-4828**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LEGACY PARTNERS** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **07 / 30 / 2014**

Transaction ID : **SA12.370943**

Amount of Each Receipt this Period **2500.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DWIGHT DAVIS

Mailing Address **33 CHESTNUT PL**

City **DANVILLE** State **CA** Zip Code **94506-4542**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA12.370916**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GLEE ANN DAVIS

Mailing Address **33 CHESTNUT PL**

City **DANVILLE** State **CA** Zip Code **94506-4542**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA12.370917**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684518

**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 367 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
HERB DEPP

Mailing Address **P.O. BOX 2340**

City HAMILTON	State MT	Zip Code 59840-4340
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date	1000.00
------------------------	----------------

Date of Receipt
 MM / DD / YYYY
06 / 29 / 2014

Transaction ID : **SA12.370918**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MELINDA DEPP

Mailing Address **P.O. BOX 2340**

City HAMILTON	State MT	Zip Code 59840-4340
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date	1000.00
------------------------	----------------

Date of Receipt
 MM / DD / YYYY
06 / 29 / 2014

Transaction ID : **SA12.370919**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FRANK A. GODCHAUX III

Mailing Address **101 WESTCOTT ST.
#1704**

City HOUSTON	State TX	Zip Code 77007-7032
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date	2500.00
------------------------	----------------

Date of Receipt
 MM / DD / YYYY
06 / 24 / 2014

Transaction ID : **SA12.370944**

Amount of Each Receipt this Period
2500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684519

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

GAIL D. HELMS

Mailing Address **5265 N. WILKINSON RD.**

City State Zip Code
PARADISE VALLEY AZ 85253-6968

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **1000.00**

Date of Receipt

MM / DD / YYYY
06 / 24 / 2014

Transaction ID : **SA12.370920**

Amount of Each Receipt this Period

1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

LUTHER S. HELMS

Mailing Address **5265 N. WILKINSON RD.**

City State Zip Code
PARADISE VALLEY AZ 85253-6968

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **1000.00**

Date of Receipt

MM / DD / YYYY
06 / 24 / 2014

Transaction ID : **SA12.370921**

Amount of Each Receipt this Period

1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

HENRY F. HUNTE

Mailing Address **6215 CAMINO DE LA COSTA**

City State Zip Code
LA JOLLA CA 92037-6523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HG FENTON COMPANY MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **1250.00**

Date of Receipt

MM / DD / YYYY
06 / 24 / 2014

Transaction ID : **SA12.370938**

Amount of Each Receipt this Period

1250.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

14020684520

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. PAUL J. ISAAC

Mailing Address **75 PROSPECT AVENUE**

City **LARCHMONT** State **NY** Zip Code **10538-3634**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 19 / 2014**
Transaction ID : **SA12.370948B**

Amount of Each Receipt this Period **-2600.00**
JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. PAUL J. ISAAC

Mailing Address **75 PROSPECT AVENUE**

City **LARCHMONT** State **NY** Zip Code **10538-3634**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **08 / 19 / 2014**
Transaction ID : **SA12.373633**

Amount of Each Receipt this Period **2600.00**
JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
RICHARD M. KOVACEVICH

Mailing Address **420 MONTGOMERY ST.
12TH FL.**

City **SAN FRANCISCO** State **CA** Zip Code **94104-1207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **07 / 17 / 2014**
Transaction ID : **SA12.370945**

Amount of Each Receipt this Period **2500.00**
JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684521

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JENNIFER LEACH

Mailing Address 49 ADAMS RD.

City State Zip Code
SUN RIVER MT 59483-9719

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA12.370923

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: GOP VICTORY FUND 2014

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JONATHAN C. LEACH

Mailing Address 49 ADAMS RD.

City State Zip Code
SUN RIVER MT 59483-9719

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
LOENBRO OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA12.370924

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: GOP VICTORY FUND 2014

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
PAUL LEACH

Mailing Address 67 ADAMS RD.

City State Zip Code
SUN RIVER MT 59483-9719

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
LOENBRO OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA12.370941

Amount of Each Receipt this Period
2000.00

JFC ATTRIB: GOP VICTORY FUND 2014

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684522

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 485
(check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
BARBARA LEFFINGWELL

Mailing Address **680 BEAR CREEK RD.**

City **VICTOR** State **MT** Zip Code **59875-9726**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370925**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
LAURENS LEFFINGWELL

Mailing Address **680 BEAR CREEK RD.**

City **VICTOR** State **MT** Zip Code **59875-9726**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RANDALL METALS CORP** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370926**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
J. DANIEL LUGOSCH III

Mailing Address **7014 SE HARBOR CIRCLE**

City **STUART** State **FL** Zip Code **34996-1922**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370946**

Amount of Each Receipt this Period
2500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684523

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
CAROLE MACKIE

Mailing Address **395 HAWK POINT LANE**

City **HAMILTON** State **MT** Zip Code **59840-9269**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **62.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370907**

Amount of Each Receipt this Period
62.50
 JFC ATTRIB: GOP VICTORY FUND 2014

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DAVID L. MACKIE

Mailing Address **395 HAWK POINT LANE**

City **HAMILTON** State **MT** Zip Code **59840-9269**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **62.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370908**

Amount of Each Receipt this Period
62.50
 JFC ATTRIB: GOP VICTORY FUND 2014

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
EFF W. MARTIN

Mailing Address **218 FAMILY FARM RD.**

City **WOODSIDE** State **CA** Zip Code **94062-1205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : **SA12.370927**

Amount of Each Receipt this Period
1000.00
 JFC ATTRIB: GOP VICTORY FUND 2014

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684524

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 485

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
PATRICIA M. MARTIN

Mailing Address **218 FAMILY FARM RD.**

City **WOODSIDE** State **CA** Zip Code **94062-1205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : **SA12.370928**

Amount of Each Receipt this Period
1000.00
 JFC ATTRIB: GOP VICTORY FUND 2014
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BRAD MILDENBERGER

Mailing Address **P.O. BOX 630**

City **HAMILTON** State **MT** Zip Code **59840-0630**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370929**

Amount of Each Receipt this Period
1000.00
 JFC ATTRIB: GOP VICTORY FUND 2014
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JOHN MILLER

Mailing Address **299 S. MAIN ST.
STE. 2450**

City **SALT LAKE CITY** State **UT** Zip Code **84111-2282**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JR MILLER ENTERPRISES** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
06 / 24 / 2014

Transaction ID : **SA12.370930**

Amount of Each Receipt this Period
1000.00
 JFC ATTRIB: GOP VICTORY FUND 2014
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684525

**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 374 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
VICKI MILLER

Mailing Address **299 S. MAIN ST.**
STE. 2450

City **SALT LAKE CITY** State **UT** Zip Code **84111-2282**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2014

Transaction ID : **SA12.370931**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JOHN L. OCHSNER

Mailing Address **1514 JEFFERSON HWY**
BH-231

City **NEW ORLEANS** State **LA** Zip Code **70121-2429**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OCHSNER CLINIC** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : **SA12.370912**

Amount of Each Receipt this Period
500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
J. JOE RICKETTS

Mailing Address **1395 SOUTH PLATTE RIVER DR.**

City **CO** State **CO** Zip Code **80223-3467**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ENTREPRENEUR** Occupation **ENTREPRENEUR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : **SA12.370942**

Amount of Each Receipt this Period
2000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

0.00

14020684526

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 375 OF 485
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JAMES E. ROHR

Mailing Address **613 DORSEVILLE RD.**

City **PITTSBURGH** State **PA** Zip Code **15238-1617**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA12.370939**

Amount of Each Receipt this Period
1250.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
PATRICK ROSE

Mailing Address **P.O. BOX 7242**

City **RANCHO SANTA FE** State **CA** Zip Code **92067-7242**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA12.370913**

Amount of Each Receipt this Period
500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
HELEN O'NEILL SCHWAB

Mailing Address **P.O. BOX 620070**

City **WOODSIDE** State **CA** Zip Code **94062-0070**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
07 / 24 / 2014

Transaction ID : **SA12.370949**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684527

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MICHAEL B. SCHWAB

Mailing Address **2311 OCEAN FRONT WALK**

City **VENICE** State **CA** Zip Code **90291-4317**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 / /
07 / 17 / 2014

Transaction ID : **SA12.370940**

Amount of Each Receipt this Period
1500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CHUCK SHONKWILER

Mailing Address **P.O. BOX 899**

City **HAMILTON** State **MT** Zip Code **59840-0899**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 / /
07 / 17 / 2014

Transaction ID : **SA12.370909**

Amount of Each Receipt this Period
200.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
NIKI A. SHONKWILER

Mailing Address **P.O. BOX 899**

City **HAMILTON** State **MT** Zip Code **59840-0899**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 / /
07 / 17 / 2014

Transaction ID : **SA12.370910**

Amount of Each Receipt this Period
200.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684528

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JUDY SIEBEL

Mailing Address **110 E. BELL CROSSING**

City **STEVENSVILLE** State **MT** Zip Code **59870-6915**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
06 / 19 / 2014

Transaction ID : **SA12.370932**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
KEN SIEBEL

Mailing Address **110 E. BELL CROSSING**

City **STEVENSVILLE** State **MT** Zip Code **59870-6915**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRIVATE WEALTH PARTNERS LLC** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
06 / 19 / 2014

Transaction ID : **SA12.370933**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
RICHARD STEED

Mailing Address **3829 TRAILS EDGE**

City **FORT WORTH** State **TX** Zip Code **76109-3430**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA12.370934**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684529

**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 378 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JAMES T. TALBOT

Mailing Address **600 LOVERS LANE**

City **HAMILTON** State **MT** Zip Code **59840-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 19 / 2014**

Transaction ID : **SA12.370935**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
KAREN A. TALBOT

Mailing Address **600 LOVERS LANE**

City **HAMILTON** State **MT** Zip Code **59840-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 19 / 2014**

Transaction ID : **SA12.370936**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
EILEEN TOULOUSE

Mailing Address **497 FANNY WITHERSPOON TRAIL**

City **HAMILTON** State **MT** Zip Code **59840-9213**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA12.370911**

Amount of Each Receipt this Period **250.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684530

**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 379 OF 485
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
HENRY WILSON

Mailing Address **8 BROOKSIDE**

City **MISSOULA** State **MT** Zip Code **59802-3278**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 28 / 2014

Transaction ID : **SA12.370937**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
HOLTZMAN VOGEL JOSEFIK, LLC

Mailing Address **45 NORTH HILL DR.
STE. 100**

City **WARRENTON** State **VA** Zip Code **20186-2678**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
07 / 17 / 2014

Transaction ID : **SA12.370922**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]
ATTRIBUTION TO PARTNERS REQUESTED

C. Full Name (Last, First, Middle Initial)
GOP VICTORY FUND 2014

Mailing Address **228 S. WASHINGTON ST.
STE. 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C** **C00563130**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **188121.94**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA12.370950**

Amount of Each Receipt this Period
24726.85

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

24726.85

14020684531

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
SUMMERFIELD C. BALDRIDGE

Mailing Address **P.O. BOX 607**

City **WHITEFISH** State **MT** Zip Code **59937-0607**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370962**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA M. BARRETT

Mailing Address **4617 E. OCOTILLO ROAD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-4032**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TRIPLE CREEK RANCH** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370957**

Amount of Each Receipt this Period
2000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
F. LYNN BATES

Mailing Address **P.O. BOX 1210**

City **VICTOR** State **MT** Zip Code **59875-1210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORCO MANAGEMENT CORP** Occupation **CORPORATE SECRETARY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370952**

Amount of Each Receipt this Period
1000.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684532

**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 381 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
S. PAULETTE BATES

Mailing Address **P.O. BOX 1210**

City **VICTOR** State **MT** Zip Code **59875-1210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 28 / 2014**

Transaction ID : **SA12.370953**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. CURTIS H. BROWN

Mailing Address **918 BAILEYANA ROAD**

City **HILLSBOROUGH** State **CA** Zip Code **94010-6108**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ENSEMBLE CAPITAL** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA12.370954**

Amount of Each Receipt this Period **1000.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JOHN J. FISHER

Mailing Address **101A CLAY ST.
STE. 147**

City **SAN FRANCISCO** State **CA** Zip Code **94111-2033**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PISCES INC.** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **07 / 17 / 2014**

Transaction ID : **SA12.370963**

Amount of Each Receipt this Period **2600.00**

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684533

**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 382 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JESS HANSEN

Mailing Address **521 OLD CORVALLIS RD.**

City HAMILTON	State MT	Zip Code 59840-3607
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FARMER
--	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 19 / 2014

Transaction ID : **SA12.370958**

Amount of Each Receipt this Period
2500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JOAN HANSEN

Mailing Address **521 OLD CORVALLIS RD.**

City HAMILTON	State MT	Zip Code 59840-3607
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 19 / 2014

Transaction ID : **SA12.370959**

Amount of Each Receipt this Period
2500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
STEVEN J. LAW

Mailing Address **7726 FALSTAFF RD.**

City MCLEAN	State VA	Zip Code 22102-2758
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370951**

Amount of Each Receipt this Period
250.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684534

**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 383 OF 485
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. LEFFELL

Mailing Address **35 SHELDRAKE RD.**

City **SCARSDALE** State **NY** Zip Code **10583-3409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **POSTAGE ADVISORS** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370964**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ANGELA MEYERS

Mailing Address **217 E. NELSON AVE.**

City **ALEXANDRIA** State **VA** Zip Code **22301-1815**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370955**

Amount of Each Receipt this Period
1250.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BRUCE RASTETTER

Mailing Address **10640 CITY HWY #D20**

City **ALDEN** State **IA** Zip Code **50006-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SUMMIT GROUP LLC** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : **SA12.370960**

Amount of Each Receipt this Period
2500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020684535

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 OF 485
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. Full Name (Last, First, Middle Initial)
JAMES SCHUELER

Mailing Address **P.O. BOX 1408**

City **HAMILTON** State **MT** Zip Code **59840-1408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : **SA12.370956**

Amount of Each Receipt this Period
1250.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
HELEN O'NEILL SCHWAB

Mailing Address **P.O. BOX 620070**

City **WOODSIDE** State **CA** Zip Code **94062-0070**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : **SA12.370965**

Amount of Each Receipt this Period
2600.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
DONALD T. VALENTINE

Mailing Address **9745 E. BAJADA RD.**

City **SCOTTSDALE** State **AZ** Zip Code **85262-8411**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEQUOIA CAPITAL** Occupation **VENTUR CAPITAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : **SA12.370961**

Amount of Each Receipt this Period
2500.00

JFC ATTRIB: **GOP VICTORY FUND 2014**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

127804.21

14020684536

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. JEREMY ADLER

Mailing Address 136 MIDDLE ST.

Date of Disbursement

M M M 07	/	D D D 07	/	Y Y Y Y Y Y Y Y 2014
-------------	---	-------------	---	-------------------------

City MANCHESTER State NH Zip Code 03101

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
COMMUNICATIONS CONSULTING

--

Transaction ID : SB17.I806

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. JEREMY ADLER

Mailing Address 136 MIDDLE ST.

Date of Disbursement

M M M 07	/	D D D 09	/	Y Y Y Y Y Y Y Y 2014
-------------	---	-------------	---	-------------------------

City MANCHESTER State NH Zip Code 03101

Amount of Each Disbursement this Period

63.00

Purpose of Disbursement
MILEAGE/PARKING

--

Transaction ID : SB17.I829

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

Date of Disbursement

M M M 08	/	D D D 06	/	Y Y Y Y Y Y Y Y 2014
-------------	---	-------------	---	-------------------------

City HUDSON State NH Zip Code 03051

Amount of Each Disbursement this Period

278.69

Purpose of Disbursement
SEE MEMO

--

Transaction ID : SB17.I1028

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

3341.69

TOTAL This Period (last page this line number only).....

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14020684537

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. WAL-MART

Mailing Address 17 COLBY CT.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	06	2014

Amount of Each Disbursement this Period

198.93

Transaction ID : SB17.I1031

[MEMO ITEM]

Date of Disbursement

MM	DD	YYYY
08	06	2014

Amount of Each Disbursement this Period

79.76

Transaction ID : SB17.I1030

[MEMO ITEM]

Date of Disbursement

MM	DD	YYYY
08	14	2014

Amount of Each Disbursement this Period

283.69

Transaction ID : SB17.I1122

SUBTOTAL of Disbursements This Page (optional)

283.69

TOTAL This Period (last page this line number only)

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14020684538

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JEREMY BAKER
Full Name (Last, First, Middle Initial)

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 14 / 2014

Amount of Each Disbursement this Period: 203.73

Transaction ID : SB17.I1124

[MEMO ITEM]

B. WAL-MART
Full Name (Last, First, Middle Initial)

Mailing Address 17 COLBY CT.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement CELL PHONES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 14 / 2014

Amount of Each Disbursement this Period: 79.96

Transaction ID : SB17.I1123

[MEMO ITEM]

C. JEREMY BAKER
Full Name (Last, First, Middle Initial)

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 1024.54

Transaction ID : SB17.I1134

SUBTOTAL of Disbursements This Page (optional)..... 1024.54

TOTAL This Period (last page this line number only).....

14020684539

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	18	2014

Amount of Each Disbursement this Period

171.19

Transaction ID : SB17.I1157

Category/
Type

Full Name (Last, First, Middle Initial)

B. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
07	08	2014

Amount of Each Disbursement this Period

383.74

Transaction ID : SB17.I814

Category/
Type

Full Name (Last, First, Middle Initial)

C. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
07	16	2014

Amount of Each Disbursement this Period

1024.54

Transaction ID : SB17.I871

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

1579.47

TOTAL This Period (last page this line number only).....

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14020684540

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M 07	/	D D D 14	/	Y Y Y Y Y Y 2014
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Amount of Each Disbursement this Period

218.58

Transaction ID : SB17.1896

Category/
Type

Full Name (Last, First, Middle Initial)

B. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M 07	/	D D D 21	/	Y Y Y Y Y Y 2014
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Amount of Each Disbursement this Period

132.06

Transaction ID : SB17.1934

Category/
Type

Full Name (Last, First, Middle Initial)

C. JEREMY BAKER

Mailing Address 39 ADAM DRIVE

City HUDSON State NH Zip Code 03051

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M 07	/	D D D 28	/	Y Y Y Y Y Y 2014
-------------	---	-------------	---	---------------------

Amount of Each Disbursement this Period

147.63

Transaction ID : SB17.1960

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

498.27

TOTAL This Period (last page this line number only).....

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14020684541

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. JEREMY BAKER

Mailing Address **39 ADAM DRIVE**

City **HUDSON** State **NH** Zip Code **03051**

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Amount of Each Disbursement this Period

1024.53

Transaction ID : **SB17.I993**

Category/
Type

Full Name (Last, First, Middle Initial)
B. LINDSAY BARRINGTON

Mailing Address **12 PERRY STREET UNIT 1**

City **CAMBRIDGE** State **MA** Zip Code **02139**

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Amount of Each Disbursement this Period

1468.19

Transaction ID : **SB17.I1135**

Category/
Type

Full Name (Last, First, Middle Initial)
C. LINDSAY BARRINGTON

Mailing Address **12 PERRY STREET UNIT 1**

City **CAMBRIDGE** State **MA** Zip Code **02139**

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 16 / 2014

Amount of Each Disbursement this Period

1468.20

Transaction ID : **SB17.I872**

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

3960.92

TOTAL This Period (last page this line number only).....

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14020684542

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. LINDSAY BARRINGTON

Full Name (Last, First, Middle Initial)
Mailing Address 12 PERRY STREET UNIT 1

City CAMBRIDGE State MA Zip Code 02139

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
1468.21

Transaction ID : SB17.I994

Category/Type

B. WESLEY BULLOCK

Full Name (Last, First, Middle Initial)
Mailing Address 44 EMERALD ST.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period
1295.26

Transaction ID : SB17.I1136

Category/Type

C. WESLEY BULLOCK

Full Name (Last, First, Middle Initial)
Mailing Address 44 EMERALD ST.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 09 / 2014

Amount of Each Disbursement this Period
250.36

Transaction ID : SB17.I832

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3013.83

TOTAL This Period (last page this line number only).....

14020684543

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. GULF OIL

Full Name (Last, First, Middle Initial)

Mailing Address 822 INTERSTATE HWY.

City NORTH PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 09 / 2014

Amount of Each Disbursement this Period: 74.66

Transaction ID : SB17.I834

[MEMO ITEM]

Category/Type

B. WESLEY BULLOCK

Full Name (Last, First, Middle Initial)

Mailing Address 44 EMERALD ST.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 1295.26

Transaction ID : SB17.I873

Category/Type

C. WESLEY BULLOCK

Full Name (Last, First, Middle Initial)

Mailing Address 44 EMERALD ST.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 1295.26

Transaction ID : SB17.I995

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 2590.52

TOTAL This Period (last page this line number only).....

14020684544

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 393 OF 485
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. MICHAEL CAFARELLI		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 15 CHEROKEE ROAD		Amount of Each Disbursement this Period 193.00 Transaction ID : SB17.11020
City CANTON	State MA	
Zip Code 02021	Purpose of Disbursement SEE MEMO	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MICHAEL CAFARELLI		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 15 CHEROKEE ROAD		Amount of Each Disbursement this Period 1024.54 Transaction ID : SB17.11137
City CANTON	State MA	
Zip Code 02021	Purpose of Disbursement STAFF SALARY	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MICHAEL CAFARELLI		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 15 CHEROKEE ROAD		Amount of Each Disbursement this Period 1024.54 Transaction ID : SB17.1874
City CANTON	State MA	
Zip Code 02021	Purpose of Disbursement STAFF SALARY	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2242.08
TOTAL This Period (last page this line number only).....	

14020684545

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MICHAEL CAFARELLI

Full Name (Last, First, Middle Initial)
Mailing Address 15 CHEROKEE ROAD

City CANTON State MA Zip Code 02021

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 15 / 2014

Amount of Each Disbursement this Period: 324.34

Transaction ID : SB17.1909

Category/Type

B. MICHAEL CAFARELLI

Full Name (Last, First, Middle Initial)
Mailing Address 15 CHEROKEE ROAD

City CANTON State MA Zip Code 02021

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 179.98

Transaction ID : SB17.1973

Category/Type

C. FEDEX

Full Name (Last, First, Middle Initial)
Mailing Address 218 GRIFFIN RD

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 179.98

Transaction ID : SB17.1974

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 504.32

TOTAL This Period (last page this line number only).....

14020684546

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (in Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. MICHAEL CAFARELLI		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 15 CHEROKEE ROAD		Amount of Each Disbursement this Period 1024.53 Transaction ID : SB17.I996
City CANTON	State MA	
Zip Code 02021		Category/ Type
Purpose of Disbursement STAFF SALARY		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) B. GENE CHANDLER		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address PO BOX 296		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.I808
City BARTLETT	State NH	
Zip Code 03812		Category/ Type
Purpose of Disbursement CAMPAIGN STRATEGY CONSULTING		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) C. GENE CHANDLER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address PO BOX 296		Amount of Each Disbursement this Period 176.10 Transaction ID : SB17.I895
City BARTLETT	State NH	
Zip Code 03812		Category/ Type
Purpose of Disbursement MILEAGE		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

SUBTOTAL of Disbursements This Page (optional)..... 2950.63

TOTAL This Period (last page this line number only).....

14020684547

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. GENE CHANDLER

Full Name (Last, First, Middle Initial)

Mailing Address **PO BOX 296**

City **BARTLETT** State **NH** Zip Code **03812**

Purpose of Disbursement
CAMPAIGN STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
1750.00

Transaction ID : **SB17.I986**

Category/Type

B. DAVID DRUMMOND

Full Name (Last, First, Middle Initial)

Mailing Address **PO BOX 600**

City **RYE** State **NH** Zip Code **03870**

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2014

Amount of Each Disbursement this Period
291.76

Transaction ID : **SB17.I885**

Category/Type

C. HILTON HOTELS

Full Name (Last, First, Middle Initial)

Mailing Address **7930 JONES BRANCH DR. STE. 1100**

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
26.01

Transaction ID : **SB17.I887**

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2041.76

14020684548

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR.

City State Zip Code
FRAMINGHAM MA 01702

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period

71.99

Transaction ID : SB17.1888

[MEMO ITEM]

Category/
Type

B. THE BILTMORE HOTEL

Mailing Address 1200 ANASTASIA AVE.

City State Zip Code
CORAL GABLES FL 33134

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period

193.76

Transaction ID : SB17.1886

[MEMO ITEM]

Category/
Type

C. BOBBY FRASER

Mailing Address 444 RIVER ROAD APT. 3

City State Zip Code
MANCHESTER NH 03104

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Amount of Each Disbursement this Period

52.50

Transaction ID : SB17.11026

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

52.50

TOTAL This Period (last page this line number only).....

14020684549

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 398 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. BOBBY FRASER

Full Name (Last, First, Middle Initial)

Mailing Address 444 RIVER ROAD APT. 3

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 1962.14

Transaction ID : SB17.I1138

Category/Type

B. BOBBY FRASER

Full Name (Last, First, Middle Initial)

Mailing Address 444 RIVER ROAD APT. 3

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 18 / 2014

Amount of Each Disbursement this Period: 238.75

Transaction ID : SB17.I1151

Category/Type

C. BOBBY FRASER

Full Name (Last, First, Middle Initial)

Mailing Address 444 RIVER ROAD APT. 3

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 18 / 2014

Amount of Each Disbursement this Period: 152.70

Transaction ID : SB17.I1152

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 2200.89

TOTAL This Period (last page this line number only).....

14020684550

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. BOBBY FRASER		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 444 RIVER ROAD APT. 3		Amount of Each Disbursement this Period 1962.14 Transaction ID : SB17.1875
City MANCHESTER	State NH	
Purpose of Disbursement STAFF SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BOBBY FRASER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 444 RIVER ROAD APT. 3		Amount of Each Disbursement this Period 37.98 Transaction ID : SB17.1892
City MANCHESTER	State NH	
Purpose of Disbursement SEE MEMO		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BOBBY FRASER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 444 RIVER ROAD APT. 3		Amount of Each Disbursement this Period 18.00 Transaction ID : SB17.1893
City MANCHESTER	State NH	
Purpose of Disbursement MILEAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.12
TOTAL This Period (last page this line number only).....	

14020684551

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. BOBBY FRASER

Mailing Address 444 RIVER ROAD APT. 3

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : SB17.1958

Category/
Type

Full Name (Last, First, Middle Initial)

B. BOBBY FRASER

Mailing Address 444 RIVER ROAD APT. 3

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : SB17.1997

Category/
Type

Full Name (Last, First, Middle Initial)

C. GRAHAM GADENNE

Mailing Address 379 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : SB17.11165

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14020684552

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. GRAHAM GADENNE

Full Name (Last, First, Middle Initial)
Mailing Address 379 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 39.78

Transaction ID : SB17.I922

Category/Type

B. GRAHAM GADENNE

Full Name (Last, First, Middle Initial)
Mailing Address 379 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I975

Category/Type

C. MATTHEW GRAVES

Full Name (Last, First, Middle Initial)
Mailing Address 12 HICKORY HILL ROAD

City MANCHESTER State NH Zip Code 01944

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 1024.53

Transaction ID : SB17.I1007

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

2064.31

TOTAL This Period (last page this line number only).....

14020684553

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. MATTHEW GRAVES		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 12 HICKORY HILL ROAD		Amount of Each Disbursement this Period 57.30 Transaction ID : SB17.I1041
City MANCHESTER	State NH	
Zip Code 01944	Purpose of Disbursement MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MATTHEW GRAVES		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 12 HICKORY HILL ROAD		Amount of Each Disbursement this Period 47.01 Transaction ID : SB17.I1132
City MANCHESTER	State NH	
Zip Code 01944	Purpose of Disbursement MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MATTHEW GRAVES		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 12 HICKORY HILL ROAD		Amount of Each Disbursement this Period 1024.54 Transaction ID : SB17.I1139
City MANCHESTER	State NH	
Zip Code 01944	Purpose of Disbursement STAFF SALARY	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1128.85
TOTAL This Period (last page this line number only).....	

14020684554

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MATTHEW GRAVES

Full Name (Last, First, Middle Initial)
Mailing Address 12 HICKORY HILL ROAD

City MANCHESTER State NH Zip Code 01944

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period
174.64

Transaction ID : SB17.I1160

Category/Type

B. MATTHEW GRAVES

Full Name (Last, First, Middle Initial)
Mailing Address 12 HICKORY HILL ROAD

City MANCHESTER State NH Zip Code 01944

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period
48.04

Transaction ID : SB17.I1162

[MEMO ITEM]

Category/Type

C. HOME DEPOT

Full Name (Last, First, Middle Initial)
Mailing Address 129 MARCH AVE.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
PARADE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period
126.60

Transaction ID : SB17.I1161

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

174.64

TOTAL This Period (last page this line number only).....

14020684555

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 OF 485		
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MATTHEW GRAVES

Full Name (Last, First, Middle Initial)
Mailing Address 12 HICKORY HILL ROAD

City MANCHESTER State NH Zip Code 01944

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period
151.26

Transaction ID : SB17.I970

Category/Type

B. MATTHEW GRAVES

Full Name (Last, First, Middle Initial)
Mailing Address 12 HICKORY HILL ROAD

City MANCHESTER State NH Zip Code 01944

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period
61.26

Transaction ID : SB17.I971

[MEMO ITEM]

Category/Type

C. ELIZABETH GUYTON

Full Name (Last, First, Middle Initial)
Mailing Address 4 SOUTH ROAD BOX 416

City RYE BEACH State NH Zip Code 03871

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 05 / 2014

Amount of Each Disbursement this Period
303.67

Transaction ID : SB17.I1018

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 454.93

TOTAL This Period (last page this line number only).....

14020684556

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Amount of Each Disbursement this Period

303.67

Transaction ID : SB17.11019

[MEMO ITEM]

Category/
Type

Full Name (Last, First, Middle Initial)

B. ELIZABETH GUYTON

Mailing Address 4 SOUTH ROAD BOX 416

City RYE BEACH State NH Zip Code 03871

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period

2283.90

Transaction ID : SB17.11140

Category/
Type

Full Name (Last, First, Middle Initial)

C. ELIZABETH GUYTON

Mailing Address 4 SOUTH ROAD BOX 416

City RYE BEACH State NH Zip Code 03871

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2014

Amount of Each Disbursement this Period

2283.91

Transaction ID : SB17.1876

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

4567.81

TOTAL This Period (last page this line number only).....

14020684557

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 406 OF 485			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. ELIZABETH GUYTON

Full Name (Last, First, Middle Initial)

Mailing Address 4 SOUTH ROAD BOX 416

City RYE BEACH State NH Zip Code 03871

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 18 / 2014

Amount of Each Disbursement this Period: 607.33

Transaction ID : SB17.1928

Category/Type

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 18 / 2014

Amount of Each Disbursement this Period: 607.33

Transaction ID : SB17.1928

[MEMO ITEM]

Category/Type

C. ELIZABETH GUYTON

Full Name (Last, First, Middle Initial)

Mailing Address 4 SOUTH ROAD BOX 416

City RYE BEACH State NH Zip Code 03871

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 25 / 2014

Amount of Each Disbursement this Period: 375.89

Transaction ID : SB17.1951

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 983.22

TOTAL This Period (last page this line number only).....

14020684558

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. ELIZABETH GUYTON		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 4 SOUTH ROAD BOX 416		Amount of Each Disbursement this Period 213.40
City RYE BEACH	State NH	
Purpose of Disbursement MILEAGE	Zip Code 03871	Transaction ID : SB17.1952
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 500 STAPLES DR.		Amount of Each Disbursement this Period 30.97
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES	Zip Code 01702	Transaction ID : SB17.1955
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. ELIZABETH GUYTON		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 4 SOUTH ROAD BOX 416		Amount of Each Disbursement this Period 2283.90
City RYE BEACH	State NH	
Purpose of Disbursement STAFF SALARY	Zip Code 03871	Transaction ID : SB17.1998
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2283.90
TOTAL This Period (last page this line number only).....	

14020684559

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JESSE HUNT

Full Name (Last, First, Middle Initial)

Mailing Address 374 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 1371.51

Transaction ID : SB17.I1141

Category/Type

B. JESSE HUNT

Full Name (Last, First, Middle Initial)

Mailing Address 374 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 1371.51

Transaction ID : SB17.I877

Category/Type

C. JESSE HUNT

Full Name (Last, First, Middle Initial)

Mailing Address 374 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 24 / 2014

Amount of Each Disbursement this Period: 206.42

Transaction ID : SB17.I946

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

2949.44

TOTAL This Period (last page this line number only).....

14020684560

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JESSE HUNT
Full Name (Last, First, Middle Initial)

Mailing Address 374 ELM ST.

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 1371.51

Transaction ID : SB17.1999

Category/Type

B. ROGER KUFKER
Full Name (Last, First, Middle Initial)

Mailing Address 11 VALLEY RD

City WELLESLEY State MA Zip Code 02481-1456

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 2600.00

Transaction ID : SB17.368601

IN KIND: RED SOX BOX

Category/Type

C. MR. SCOTT LOGSDON
Full Name (Last, First, Middle Initial)

Mailing Address 23 NUTTINGHAM RD.

City WINDHAM State NH Zip Code 03087-1101

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 21 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : SB17.368683

IN KIND: ICE & WATER

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

4071.51

TOTAL This Period (last page this line number only).....

14020684561

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MICHELLE E. MCGANN

Full Name (Last, First, Middle Initial)

Mailing Address 379 ELM ST

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 2370.00

Transaction ID : SB17.I1142

Category/Type

B. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 888.07

Transaction ID : SB17.I1000

Category/Type

C. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 181.07

Transaction ID : SB17.I1038

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

3439.14

TOTAL This Period (last page this line number only).....

14020684562

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 411 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 128.58

Transaction ID : SB17.I1040

[MEMO ITEM]

B. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 14 / 2014

Amount of Each Disbursement this Period: 137.26

Transaction ID : SB17.I1129

C. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 14 / 2014

Amount of Each Disbursement this Period: 127.29

Transaction ID : SB17.I1131

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 137.26

TOTAL This Period (last page this line number only).....

14020684563

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 412 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 1210.36

Transaction ID : SB17.I1143

Category/Type

B. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 18 / 2014

Amount of Each Disbursement this Period: 141.00

Transaction ID : SB17.I1159

Category/Type

C. MARA MELLSTROM

Full Name (Last, First, Middle Initial)

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 254.35

Transaction ID : SB17.I822

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1605.71

TOTAL This Period (last page this line number only).....

14020684564

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. MARA MELLSTROM

Mailing Address 489 MANOR LANE

City State Zip Code
PELHAM NY 10803

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period

81.75

Transaction ID : SB17.I823

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DOLLAR TREE

Mailing Address 77 DERRY ROAD

City State Zip Code
HUDSON NH 03051

Purpose of Disbursement
EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period

124.00

Transaction ID : SB17.I824

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOME DEPOT

Mailing Address 129 MARCH AVE.

City State Zip Code
MANCHESTER NH 03103

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period

48.60

Transaction ID : SB17.I825

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

14020684565

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MARA MELLSTROM

Full Name (Last, First, Middle Initial)
MARA MELLSTROM

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 16 / 2014

Amount of Each Disbursement this Period
888.07

Transaction ID : SB17.I878

Category/Type

B. MARA MELLSTROM

Full Name (Last, First, Middle Initial)
MARA MELLSTROM

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period
109.27

Transaction ID : SB17.I898

Category/Type

C. MARA MELLSTROM

Full Name (Last, First, Middle Initial)
MARA MELLSTROM

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 21 / 2014

Amount of Each Disbursement this Period
191.25

Transaction ID : SB17.I938

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

1188.59

TOTAL This Period (last page this line number only).....

14020684566

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 415 OF 485			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MARA MELLSTROM

Full Name (Last, First, Middle Initial)
MARA MELLSTROM

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period
244.47

Transaction ID : SB17.I966

Category/Type

B. MARA MELLSTROM

Full Name (Last, First, Middle Initial)
MARA MELLSTROM

Mailing Address 489 MANOR LANE

City PELHAM State NY Zip Code 10803

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period
186.12

Transaction ID : SB17.I967

[MEMO ITEM]

Category/Type

C. JOHN PEARSON

Full Name (Last, First, Middle Initial)
JOHN PEARSON

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement
STAFF SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
1024.53

Transaction ID : SB17.I1001

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1269.00

TOTAL This Period (last page this line number only).....

14020684567

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 416 OF 485		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address **5 TERRACEWOOD ROAD**

City **LONDONDERRY** State **NH** Zip Code **03053**

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 06 / 2014**

Amount of Each Disbursement this Period: **191.02**

Transaction ID : **SB17.I1032**

Category/Type

B. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address **5 TERRACEWOOD ROAD**

City **LONDONDERRY** State **NH** Zip Code **03053**

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 06 / 2014**

Amount of Each Disbursement this Period: **127.20**

Transaction ID : **SB17.I1035**

[MEMO ITEM]

Category/Type

C. LOWE'S

Full Name (Last, First, Middle Initial)

Mailing Address **1000 LOWES BLVD.**

City **MOORESVILLE** State **NC** Zip Code **28117**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 06 / 2014**

Amount of Each Disbursement this Period: **26.98**

Transaction ID : **SB17.I1033**

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **191.02**

TOTAL This Period (last page this line number only).....

14020684568

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN PEARSON
Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 14 / 2014

Amount of Each Disbursement this Period
266.50

Transaction ID : SB17.I1125

Category/Type

B. JOHN PEARSON
Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 14 / 2014

Amount of Each Disbursement this Period
142.28

Transaction ID : SB17.I1128

[MEMO ITEM]

Category/Type

C. LOWE'S
Full Name (Last, First, Middle Initial)

Mailing Address 1000 LOWES BLVD.

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 14 / 2014

Amount of Each Disbursement this Period
103.38

Transaction ID : SB17.I1126

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 266.50

TOTAL This Period (last page this line number only).....

14020684569

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 418 OF 485			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial) A. JOHN PEARSON		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 5 TERRACEWOOD ROAD		Amount of Each Disbursement this Period 1024.54 Transaction ID : SB17.I1144
City LONDONDERRY	State NH	
Purpose of Disbursement STAFF SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. JOHN PEARSON		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 5 TERRACEWOOD ROAD		Amount of Each Disbursement this Period 80.88 Transaction ID : SB17.I1158
City LONDONDERRY	State NH	
Purpose of Disbursement MILEAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. JOHN PEARSON		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 5 TERRACEWOOD ROAD		Amount of Each Disbursement this Period 122.20 Transaction ID : SB17.I815
City LONDONDERRY	State NH	
Purpose of Disbursement SEE MEMO		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1227.62
TOTAL This Period (last page this line number only).....	

14020684570

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 63.60

Transaction ID : SB17.I816

[MEMO ITEM]

B. HOME DEPOT

Full Name (Last, First, Middle Initial)

Mailing Address 129 MARCH AVE.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 25.97

Transaction ID : SB17.I818

[MEMO ITEM]

C. MARKET BASKET

Full Name (Last, First, Middle Initial)

Mailing Address 460 ELM STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 23.77

Transaction ID : SB17.I817

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

14020684571

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 1024.54

Transaction ID : SB17.I879

Category/Type

B. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 140.70

Transaction ID : SB17.I897

Category/Type

C. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 21 / 2014

Amount of Each Disbursement this Period: 179.72

Transaction ID : SB17.I935

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1344.96

TOTAL This Period (last page this line number only).....

14020684572

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN PEARSON

Full Name (Last, First, Middle Initial)
Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 21 / 2014

Amount of Each Disbursement this Period: 135.60

Transaction ID : SB17.I936

[MEMO ITEM]

B. MARKET BASKET

Full Name (Last, First, Middle Initial)
Mailing Address 460 ELM STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 21 / 2014

Amount of Each Disbursement this Period: 44.12

Transaction ID : SB17.I937

[MEMO ITEM]

C. JOHN PEARSON

Full Name (Last, First, Middle Initial)
Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period: 194.73

Transaction ID : SB17.I961

SUBTOTAL of Disbursements This Page (optional)..... 194.73

TOTAL This Period (last page this line number only).....

14020684573

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 422 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN PEARSON

Full Name (Last, First, Middle Initial)

Mailing Address 5 TERRACEWOOD ROAD

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 127.46

Transaction ID : SB17.I962

[MEMO ITEM]

B. LOWE'S

Full Name (Last, First, Middle Initial)

Mailing Address 1000 LOWES BLVD.

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 26.98

Transaction ID : SB17.I965

[MEMO ITEM]

C. COLIN REED

Full Name (Last, First, Middle Initial)

Mailing Address 136 MIDDLE STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 3620.26

Transaction ID : SB17.I1002

SUBTOTAL of Disbursements This Page (optional)..... 3620.26

TOTAL This Period (last page this line number only).....

14020684574

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 423 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. COLIN REED

Full Name (Last, First, Middle Initial)

Mailing Address 136 MIDDLE STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period: 3620.26

Transaction ID : SB17.I1145

Category/Type

B. COLIN REED

Full Name (Last, First, Middle Initial)

Mailing Address 136 MIDDLE STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 16 / 2014

Amount of Each Disbursement this Period: 3620.26

Transaction ID : SB17.I880

Category/Type

C. COLIN REED

Full Name (Last, First, Middle Initial)

Mailing Address 136 MIDDLE STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement OFFICE SUPPLIES NO ITEMIZATION NECESSARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 30 / 2014

Amount of Each Disbursement this Period: 45.00

Transaction ID : SB17.I980

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 7285.52

TOTAL This Period (last page this line number only).....

14020684575

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 424 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. LYNDSAY ROBINSON

Full Name (Last, First, Middle Initial)
Mailing Address 147 CATAMOUNT ROAD

City TEWKSBURY State MA Zip Code 01876

Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period
1500.00

Transaction ID : SB17.I794

Category/Type

B. LYNDSAY ROBINSON

Full Name (Last, First, Middle Initial)
Mailing Address 147 CATAMOUNT ROAD

City TEWKSBURY State MA Zip Code 01876

Purpose of Disbursement
FIELD CONSULTING/MILEAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period
372.81

Transaction ID : SB17.I820

Category/Type

C. STEVEN ROCHE

Full Name (Last, First, Middle Initial)
Mailing Address 100 TRADE CENTER STE. G-700

City WOBORN State MA Zip Code 01801

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period
3133.68

Transaction ID : SB17.I910

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5006.49

TOTAL This Period (last page this line number only).....

14020684576

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 425 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. BOSTON LOGAN INTERNATIONAL AIRPORT

Mailing Address **1 HJARBORSIDE DR.**

City **BOSTON** State **MA** Zip Code **02128**

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period
128.00

Transaction ID : **SB17.I914**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. FIRST CAR & LIMO SERVICE

Mailing Address **99 09 42ND AVE. #2F**

City **MANHATTAN** State **NY** Zip Code **11368**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period
1103.00

Transaction ID : **SB17.I915**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. MARRIOTT HOTELS

Mailing Address **10400 FERNWOOD ROAD**

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period
136.58

Transaction ID : **SB17.I917**

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684577

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 426 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. US AIRWAYS

Mailing Address 111 W. RIO SALADO PARKWAY

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period: 1576.00

Transaction ID : SB17.I916

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. STEVEN ROCHE

Mailing Address 100 TRADE CENTER STE. G-700

City WOBORN State MA Zip Code 01801

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 22 / 2014

Amount of Each Disbursement this Period: 2350.83

Transaction ID : SB17.I939

Full Name (Last, First, Middle Initial)
C. BOSTON LOGAN INTERNATIONAL AIRPORT

Mailing Address 1 HJARBORSIDE DR.

City BOSTON State MA Zip Code 02128

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 22 / 2014

Amount of Each Disbursement this Period: 117.00

Transaction ID : SB17.I1012

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 2350.83

TOTAL This Period (last page this line number only).....

14020684578

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 427 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. DELTA AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period: 881.00

Transaction ID : SB17.I1013

[MEMO ITEM]

B. GROUNDLINK

Full Name (Last, First, Middle Initial)
Mailing Address 134 W 37TH STREET

City NEW YORK State NY Zip Code 10018

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 22 / 2014

Amount of Each Disbursement this Period: 295.00

Transaction ID : SB17.I1011

[MEMO ITEM]

C. MARRIOTT HOTELS

Full Name (Last, First, Middle Initial)
Mailing Address 10400 FERNWOOD ROAD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 22 / 2014

Amount of Each Disbursement this Period: 425.43

Transaction ID : SB17.I1010

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684579

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 428 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. US AIRWAYS

Full Name (Last, First, Middle Initial)

Mailing Address 111 W. RIO SALADO PARKWAY

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 22 / 2014

Amount of Each Disbursement this Period: 573.84

Transaction ID : SB17.I1015

[MEMO ITEM]

B. KENNETH SCHICIANO

Full Name (Last, First, Middle Initial)

Mailing Address 43 HIGHGATE ROAD
TA ASSOCIATES DO NOT MAIL

City WELLESLEY State MA Zip Code 02481-1419

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 17 / 2014

Amount of Each Disbursement this Period: 2600.00

Transaction ID : SB17.368603

IN KIND: RED SOX BOX

C. MATTHEW SCULLY

Full Name (Last, First, Middle Initial)

Mailing Address 8989 N. GAINNEY CENTER DR.
UNIT 106

City SCOTTSDALE State AZ Zip Code 85258

Purpose of Disbursement SPEECH WRITING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 03 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I804

SUBTOTAL of Disbursements This Page (optional)..... 3600.00

TOTAL This Period (last page this line number only).....

14020684580

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 429 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. LEIGH ANN SHRIVER

Full Name (Last, First, Middle Initial)
Mailing Address 4 POND DRIVE

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement VOLUNTEER STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I987

B. STEFANIE WEBB

Full Name (Last, First, Middle Initial)
Mailing Address 16 HAZEL STREET

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 1920.99

Transaction ID : SB17.I1003

C. STEFANIE WEBB

Full Name (Last, First, Middle Initial)
Mailing Address 16 HAZEL STREET

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 1920.99

Transaction ID : SB17.I1146

SUBTOTAL of Disbursements This Page (optional)..... 4841.98

TOTAL This Period (last page this line number only).....

14020684581

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 430 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. STEFANIE WEBB

Full Name (Last, First, Middle Initial)
Mailing Address 16 HAZEL STREET

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement STAFF SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 5495.17

Transaction ID : SB17.I881

Category/Type

B. RYAN WILLIAMS

Full Name (Last, First, Middle Initial)
Mailing Address 1899 L STREET NW #850

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 3327.87

Transaction ID : SB17.I899

Category/Type

C. LUILUI

Full Name (Last, First, Middle Initial)
Mailing Address BOX 11 POWERHOUSE MALL

City WEST LEBANON State NH Zip Code 03784

Purpose of Disbursement EVENT CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 958.13

Transaction ID : SB17.I904

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 8823.04

TOTAL This Period (last page this line number only).....

14020684582

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 431 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. MARRIOTT HOTELS

Mailing Address **10400 FERNWOOD ROAD**

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period
262.42

Transaction ID : **SB17.I906**

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
B. SOUTHWEST AIRLINES

Mailing Address **2702 LOVE FIELD DR.**

City **DALLAS** State **TX** Zip Code **75235**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period
346.00

Transaction ID : **SB17.I907**

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
C. TOWN & COUNTRY INN

Mailing Address **20 US 2**

City **GORHAM** State **NH** Zip Code **03581**

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period
290.76

Transaction ID : **SB17.I905**

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684583

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 432 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. TUCKERMANS RESTAURANT & TAVERN

Mailing Address **ROUTE 16A**

City **INTERVAL** State **NH** Zip Code **03845**

Purpose of Disbursement
EVENT CATERING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period
518.73

Transaction ID : **SB17.I900**

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
B. US AIRWAYS

Mailing Address **111 W. RIO SALADO PARKWAY**

City **TEMPE** State **AZ** Zip Code **85281**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period
843.00

Transaction ID : **SB17.I903**

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
C. ADP

Mailing Address **105 GAY STREET**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
6924.71

Transaction ID : **SB17.I1004**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **6924.71**

TOTAL This Period (last page this line number only).....

14020684584

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period: 362.35

Transaction ID : SB17.I1008

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement PAYROLL SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 08 / 2014

Amount of Each Disbursement this Period: 75.25

Transaction ID : SB17.I1133

C. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period: 8543.11

Transaction ID : SB17.I1147

SUBTOTAL of Disbursements This Page (optional)..... 8980.71

TOTAL This Period (last page this line number only).....

14020684585

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 434 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. ADP

Full Name (Last, First, Middle Initial)
Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
PAYROLL SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period: 54.50

Transaction ID : SB17.I1168

Category/Type

B. ADP

Full Name (Last, First, Middle Initial)
Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
PAYROLL SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 75.25

Transaction ID : SB17.I838

Category/Type

C. ADP

Full Name (Last, First, Middle Initial)
Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 16 / 2014

Amount of Each Disbursement this Period: 8787.50

Transaction ID : SB17.I882

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 8917.25

TOTAL This Period (last page this line number only).....

14020684586

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 435 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 105 GAY STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement PAYROLL SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 25 / 2014

Amount of Each Disbursement this Period: 102.50

Transaction ID : SB17.I944

B. AIRNET GROUP INC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement TELEPHONES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period: 1169.49

Transaction ID : SB17.I811

C. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 200 VESEY ST.

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period: 2429.05

Transaction ID : SB17.I790

SUBTOTAL of Disbursements This Page (optional) 3701.04

TOTAL This Period (last page this line number only)

14020684587

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 436 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)
Mailing Address 200 VESEY ST.
City NEW YORK State NY Zip Code 10285
Purpose of Disbursement CC TRANSACTION FEES
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
1786.68
Transaction ID : SB17.1992

B. AMERICAN VIEWPOINT

Full Name (Last, First, Middle Initial)
Mailing Address 300 NORTH LEE STREET STE. 400
City ALEXANDRIA State VA Zip Code 22314
Purpose of Disbursement POLLING
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 03 / 2014

Amount of Each Disbursement this Period
52000.00
Transaction ID : SB17.1801

C. AMERICAN VIEWPOINT

Full Name (Last, First, Middle Initial)
Mailing Address 300 NORTH LEE STREET STE. 400
City ALEXANDRIA State VA Zip Code 22314
Purpose of Disbursement POLLING
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 07 / 2014

Amount of Each Disbursement this Period
4800.00
Transaction ID : SB17.1809

SUBTOTAL of Disbursements This Page (optional)..... 58586.68

TOTAL This Period (last page this line number only).....

14020684588

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 437 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. BOSTON PRODUCTIONS INC.

Full Name (Last, First, Middle Initial)

Mailing Address 290 VANDERBILT AVE. STE. 1

City NORWOOD State MA Zip Code 02062

Purpose of Disbursement MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period: 2599.00

Transaction ID : SB17.I812

Category/Type

B. BOSTON PRODUCTIONS INC.

Full Name (Last, First, Middle Initial)

Mailing Address 290 VANDERBILT AVE. STE. 1

City NORWOOD State MA Zip Code 02062

Purpose of Disbursement MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period: 15334.00

Transaction ID : SB17.I959

Category/Type

C. BOWDITCH & DEWEY

Full Name (Last, First, Middle Initial)

Mailing Address 311 MAIN STREET

City WORCESTER State MA Zip Code 01615

Purpose of Disbursement LEGAL FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB17.I793

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 21433.00

TOTAL This Period (last page this line number only).....

14020684589

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 438 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. BOWDITCH & DEWEY

Full Name (Last, First, Middle Initial)
Mailing Address 311 MAIN STREET

City WORCESTER State MA Zip Code 01615

Purpose of Disbursement LEGAL FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB17.I985

Category/Type

B. BUSINESS CARD

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 15796

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period: 84.85

Transaction ID : SB17.I911

Category/Type

C. MA DEPT. OF TRANSPORTATION

Full Name (Last, First, Middle Initial)
Mailing Address 10 PARK PLAZA STE. 4160

City BOSTON State MA Zip Code 02116

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period: 84.85

Transaction ID : SB17.I912

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3584.85

TOTAL This Period (last page this line number only).....

14020684590

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 439 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. CAPITAL PREMIUM FINANCING INC.

Mailing Address **PO BOX 660899**

City **DALLAS** State **TX** Zip Code **75266**

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period
8074.52

Transaction ID : **SB17.I785**

Category/Type

Full Name (Last, First, Middle Initial)
B. CAPITOL HILL SERVICES INC.

Mailing Address **700 MAMMOTH ROAD**

City **MANCHESTER** State **NH** Zip Code **03104**

Purpose of Disbursement
OFFICE CLEANING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 05 / 2014

Amount of Each Disbursement this Period
240.00

Transaction ID : **SB17.I1017**

Category/Type

Full Name (Last, First, Middle Initial)
C. CAPITOL HILL SERVICES INC.

Mailing Address **700 MAMMOTH ROAD**

City **MANCHESTER** State **NH** Zip Code **03104**

Purpose of Disbursement
OFFICE CLEANING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period
352.00

Transaction ID : **SB17.I813**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **8666.52**

TOTAL This Period (last page this line number only).....

14020684591

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 440 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. CAUSEWAY SOLUTIONS

Mailing Address **PO BOX 9114**

City **METAIRIE** State **LA** Zip Code **70055**

Purpose of Disbursement
DATA AUDIT SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 06 / 2014

Amount of Each Disbursement this Period
1000.00

Transaction ID : **SB17.I1027**

Category/Type

Full Name (Last, First, Middle Initial)
B. CHAIN BRIDGE BANK

Mailing Address **1445-A LAUGHLIN AVE.**

City **MCLEAN** State **VA** Zip Code **22101**

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period
176.83

Transaction ID : **SB17.I1170**

Category/Type

Full Name (Last, First, Middle Initial)
C. CHAIN BRIDGE BANK

Mailing Address **1445-A LAUGHLIN AVE.**

City **MCLEAN** State **VA** Zip Code **22101**

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period
305.85

Transaction ID : **SB17.I924**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **1482.68**

TOTAL This Period (last page this line number only).....

14020684592

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 441 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. CMDI

Full Name (Last, First, Middle Initial)
Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement COMPLIANCE CONSULTING/CAGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period: 4883.80

Transaction ID : SB17.I1006

B. CMDI

Full Name (Last, First, Middle Initial)
Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement E-MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period: 5449.37

Transaction ID : SB17.I1121

C. CMDI

Full Name (Last, First, Middle Initial)
Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period: 3183.37

Transaction ID : SB17.I784

SUBTOTAL of Disbursements This Page (optional)..... 13516.54

TOTAL This Period (last page this line number only).....

14020684593

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 442 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement COMPLIANCE CONSULTING/CAGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 07 / 2014

Amount of Each Disbursement this Period: 6417.35

Transaction ID : SB17.I802

Category/Type

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement E-MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 14 / 2014

Amount of Each Disbursement this Period: 4915.76

Transaction ID : SB17.I891

Category/Type

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement CAGING & ESCROW

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 23 / 2014

Amount of Each Disbursement this Period: 175.00

Transaction ID : SB17.I943

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 11508.11

TOTAL This Period (last page this line number only).....

14020684594

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 443 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. CMDI

Full Name (Last, First, Middle Initial)
Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement CAGING & ESCROW

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : SB17.I956

B. CMDI

Full Name (Last, First, Middle Initial)
Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 29 / 2014

Amount of Each Disbursement this Period: 3135.47

Transaction ID : SB17.I976

C. COMCAST

Full Name (Last, First, Middle Initial)
Mailing Address 586 VALLEY ST.

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement CABLE/INTERNET SERVICE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 02 / 2014

Amount of Each Disbursement this Period: 364.21

Transaction ID : SB17.I799

SUBTOTAL of Disbursements This Page (optional)..... 3749.68

TOTAL This Period (last page this line number only).....

14020684595

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. COPY-PRO INC.

Mailing Address 46 FOWLE ST.

City State Zip Code
WOBURN MA 01801

Purpose of Disbursement
OFFICE EQUIPMENT RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2014

Amount of Each Disbursement this Period

844.70

Transaction ID : SB17.I940

Category/
Type

B. CSI AVIATION

Mailing Address 3700 RIO GRANDE BLVD. STE. 1

City State Zip Code
ALBUQUERQUE NM 87107

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2014

Amount of Each Disbursement this Period

6572.00

Transaction ID : SB17.I941

Category/
Type

C. EBERSOLE PHOTOGRAPHY

Mailing Address 1 BARTLETT ST. APT. 2

City State Zip Code
BEVERLY MA 01915

Purpose of Disbursement
PHOTOGRAPHY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Amount of Each Disbursement this Period

262.50

Transaction ID : SB17.I803

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

7679.20

TOTAL This Period (last page this line number only).....

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14020684596

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 445 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. EVENT STRATEGIES INC.

Full Name (Last, First, Middle Initial)
Mailing Address 4416 WHEELER AVE.

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
EVENT EQUIPMENT SETUP

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period: 6600.00

Transaction ID : SB17.I1155

Category/Type

B. FIRST BANKCARD

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2818

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 16316.14

Transaction ID : SB17.I1054

Category/Type

C. ALL ABOUT NETWORK LLC

Full Name (Last, First, Middle Initial)
Mailing Address 7319 SANDSCOVE CT

City WINTER PARK State FL Zip Code 32792

Purpose of Disbursement
ADVERTISING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 725.00

Transaction ID : SB17.I1120

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 22916.14

TOTAL This Period (last page this line number only).....

14020684597

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 446 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. AMAZON

Mailing Address 1200 12TH AVE. S STE. 1200

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 584.82

Transaction ID : SB17.I1055

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. ARAMARK FENWAY PARK

Mailing Address 4 YAWKEY WAY

City BOSTON State MA Zip Code 02215

Purpose of Disbursement EVENT CATERING/FACILITY RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 2304.57

Transaction ID : SB17.I1118

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. BLACK WATER GRILLE

Mailing Address 43 PELHAM RD

City SALEM State NH Zip Code 03079

Purpose of Disbursement EVENT CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 441.73

Transaction ID : SB17.I1085

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

14020684598

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 447 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. CHRISTIAN PARTY RENTAL

Full Name (Last, First, Middle Initial)
Mailing Address 18 CLINTON DR.

City Hollis State NH Zip Code 03049

Purpose of Disbursement
EVENT EQUIPMENT RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 254.00

Transaction ID : SB17.I1084

[MEMO ITEM]

B. CIRCLE K

Full Name (Last, First, Middle Initial)
Mailing Address 2470 LAFAYETTE ROAD

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 657.64

Transaction ID : SB17.I1074

[MEMO ITEM]

C. CITY OF PORTSMOUTH

Full Name (Last, First, Middle Initial)
Mailing Address 1 JUNKINS AVE.

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 1.10

Transaction ID : SB17.I1110

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684599

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. DOLLAR TREE

Mailing Address **77 DERRY ROAD**

City **HUDSON** State **NH** Zip Code **03051**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

33.50

Transaction ID : **SB17.I1075**

[MEMO ITEM]

B. EXXONMOBIL

Mailing Address **21 MAIN STREET**

City **MANCHESTER** State **NH** Zip Code **03102**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

485.62

Transaction ID : **SB17.I1068**

[MEMO ITEM]

C. GULF OIL

Mailing Address **822 INTERSTATE HWY.**

City **NORTH PORTSMOUTH** State **NH** Zip Code **03801**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

27.73

Transaction ID : **SB17.I1089**

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

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14020684600

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. HANNAFORD

Full Name (Last, First, Middle Initial)
Mailing Address 145 PLEASANT HILL ROAD

City SCARBOROUGH State ME Zip Code 04074

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 244.44

Transaction ID : SB17.I1111

[MEMO ITEM]

B. HESS EXPRESS

Full Name (Last, First, Middle Initial)
Mailing Address 639 LAFAYETTE ROAD

City HAMPTON State NH Zip Code 03842

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 88.30

Transaction ID : SB17.I1072

[MEMO ITEM]

C. HOME DEPOT

Full Name (Last, First, Middle Initial)
Mailing Address 129 MARCH AVE.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 9.98

Transaction ID : SB17.I1063

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684601

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 450 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. LOWE'S

Full Name (Last, First, Middle Initial)

Mailing Address 1000 LOWES BLVD.

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 752.64

Transaction ID : SB17.I1080

[MEMO ITEM]

B. MARRIOTT HOTELS

Full Name (Last, First, Middle Initial)

Mailing Address 10400 FERNWOOD ROAD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 427.55

Transaction ID : SB17.I1092

[MEMO ITEM]

C. MASSACHUSETTS PORT AUTHORITY

Full Name (Last, First, Middle Initial)

Mailing Address 1 HARBORSIDE DR

City EAST BOSTON State MA Zip Code 02128

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 99.00

Transaction ID : SB17.I1093

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684602

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 451 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. NET10 SERVICES

Full Name (Last, First, Middle Initial)
NET10 SERVICES

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 408.36

Transaction ID : SB17.I1066

[MEMO ITEM]

B. PANERA BREAD CO.

Full Name (Last, First, Middle Initial)
PANERA BREAD CO.

Mailing Address 7 COLBY CT.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 153.20

Transaction ID : SB17.I1065

[MEMO ITEM]

C. PETES SEWER SERVICE

Full Name (Last, First, Middle Initial)
PETES SEWER SERVICE

Mailing Address 124 FORREST ST.

City PLAISTOW State NH Zip Code 03365

Purpose of Disbursement OFFICE MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.I1114

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684603

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 452 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. PINARD WASTE SYSTEM

Full Name (Last, First, Middle Initial)
Mailing Address 32 W. RIVER ROAD

City HOOKSET State NH Zip Code 03106

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 165.00

Transaction ID : SB17.I1061

[MEMO ITEM]

B. POLAND SPRING WATER

Full Name (Last, First, Middle Initial)
Mailing Address 109 POLAND SPRING DT.

City POLAND State ME Zip Code 04274

Purpose of Disbursement OFFICE WATER

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 567.95

Transaction ID : SB17.I1076

[MEMO ITEM]

C. PORTSMOUTH 66

Full Name (Last, First, Middle Initial)
Mailing Address 2975 LAFAYETTE ROAD

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 174.33

Transaction ID : SB17.I1097

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684604

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 453 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. SAM HOSPITALITY CORP.

Mailing Address **2 SOMERSET PKWY**

City **NASHUA** State **NH** Zip Code **03063**

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period
218.00

Transaction ID : **SB17.I1083**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. SHELL OIL

Mailing Address **570 ELM STREET**

City **MANCHESTER** State **NH** Zip Code **03101**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period
252.59

Transaction ID : **SB17.I1081**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. STAPLES

Mailing Address **500 STAPLES DR.**

City **FRAMINGHAM** State **MA** Zip Code **01702**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period
97.35

Transaction ID : **SB17.I1062**

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684605

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 454 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. THE ONE HUNDRED CLUB

Full Name (Last, First, Middle Initial)
Mailing Address 100 MARKET ST. STE. 500

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
EVENT FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period
308.00

Transaction ID : SB17.I1119

[MEMO ITEM]

B. THEO'S RESTAURANT

Full Name (Last, First, Middle Initial)
Mailing Address 102 ELM STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
MEETING EXPENSES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period
459.62

Transaction ID : SB17.I1056

[MEMO ITEM]

C. TOWN & COUNTRY INN

Full Name (Last, First, Middle Initial)
Mailing Address 20 US 2

City GORHAM State NH Zip Code 03581

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period
177.33

Transaction ID : SB17.I1096

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684606

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 455 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. UPS

Full Name (Last, First, Middle Initial)

Mailing Address **373 S. WILLOW ST.**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement
SHIPPING/PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 13 / 2014**

Amount of Each Disbursement this Period: **545.60**

Transaction ID : **SB17.I1113**

[MEMO ITEM]

B. US AIRWAYS

Full Name (Last, First, Middle Initial)

Mailing Address **111 W. RIO SALADO PARKWAY**

City **TEMPE** State **AZ** Zip Code **85281**

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 13 / 2014**

Amount of Each Disbursement this Period: **598.10**

Transaction ID : **SB17.I1116**

[MEMO ITEM]

C. US POSTMASTER

Full Name (Last, First, Middle Initial)

Mailing Address **475 L'ENFANT PLAZA SW**

City **WASHINGTON** State **DC** Zip Code **20260**

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 13 / 2014**

Amount of Each Disbursement this Period: **2546.34**

Transaction ID : **SB17.I1058**

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684607

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 456 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. VIP TIRES & SERVICE

Full Name (Last, First, Middle Initial)
Mailing Address 2179 LAFAYETTE ROAD

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
VEHICLE MAINTENANCE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 471.86

Transaction ID : SB17.I1104

[MEMO ITEM]

B. WAL-MART

Full Name (Last, First, Middle Initial)
Mailing Address 17 COLBY CT.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2014

Amount of Each Disbursement this Period: 2.84

Transaction ID : SB17.I1117

[MEMO ITEM]

C. FIRST BANKCARD

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2818

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 4777.08

Transaction ID : SB17.I848

SUBTOTAL of Disbursements This Page (optional)..... 4777.08

TOTAL This Period (last page this line number only).....

14020684608

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. AMAZON

Mailing Address 1200 12TH AVE. S STE. 1200

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 253.12

Transaction ID : SB17.I854

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. BEST WESTERN

Mailing Address 13500 SOUTH WILLOW STREET

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 109.00

Transaction ID : SB17.I869

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. CIRCLE K

Mailing Address 2470 LAFAYETTE ROAD

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 95.84

Transaction ID : SB17.I852

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684609

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 458 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. COMCAST

Full Name (Last, First, Middle Initial)

Mailing Address **586 VALLEY ST.**

City **MANCHESTER** State **NH** Zip Code **03109**

Purpose of Disbursement
CABLE/INTERNET SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
432.70

Transaction ID : **SB17.I868**

[MEMO ITEM]

B. DOLLAR TREE

Full Name (Last, First, Middle Initial)

Mailing Address **77 DERRY ROAD**

City **HUDSON** State **NH** Zip Code **03051**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
92.00

Transaction ID : **SB17.I863**

[MEMO ITEM]

C. EXXONMOBIL

Full Name (Last, First, Middle Initial)

Mailing Address **21 MAIN STREET**

City **MANCHESTER** State **NH** Zip Code **03102**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
89.51

Transaction ID : **SB17.I864**

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684610

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 459 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. HESS EXPRESS

Full Name (Last, First, Middle Initial)
Mailing Address **639 LAFAYETTE ROAD**

City **HAMPTON** State **NH** Zip Code **03842**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
95.12

Transaction ID : **SB17.I867**

[MEMO ITEM]

B. HOME DEPOT

Full Name (Last, First, Middle Initial)
Mailing Address **129 MARCH AVE.**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
1133.91

Transaction ID : **SB17.I856**

[MEMO ITEM]

C. MARKET BASKET

Full Name (Last, First, Middle Initial)
Mailing Address **460 ELM STREET**

City **MANCHESTER** State **NH** Zip Code **03101**

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
24.24

Transaction ID : **SB17.I858**

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684611

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 460 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. NET10 SERVICES

Full Name (Last, First, Middle Initial)
NET10 SERVICES

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 185.55

Transaction ID : SB17.I862

[MEMO ITEM]

B. PANERA BREAD CO.

Full Name (Last, First, Middle Initial)
PANERA BREAD CO.

Mailing Address 7 COLBY CT.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 18.02

Transaction ID : SB17.I870

[MEMO ITEM]

C. PRINTERS SQUARE INC.

Full Name (Last, First, Middle Initial)
PRINTERS SQUARE INC.

Mailing Address 105 FALTIN DR.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period: 1169.27

Transaction ID : SB17.I851

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

14020684612

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 461 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. SHELL OIL

Mailing Address **570 ELM STREET**

City **MANCHESTER** State **NH** Zip Code **03101**

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
92.83

Transaction ID : **SB17.I849**

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
B. SHERWIN WILLIAMS

Mailing Address **555 VALLEY STREET**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
20.79

Transaction ID : **SB17.I857**

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
C. STAPLES

Mailing Address **500 STAPLES DR.**

City **FRAMINGHAM** State **MA** Zip Code **01702**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
166.92

Transaction ID : **SB17.I855**

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

TOTAL This Period (last page this line number only).....

14020684613

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 462 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. TOWN & COUNTRY INN

Mailing Address **20 US 2**

City **GORHAM** State **NH** Zip Code **03581**

Purpose of Disbursement **LODGING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **07 / 11 / 2014**

Amount of Each Disbursement this Period: **256.31**

Transaction ID : **SB17.I866**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. WAL-MART

Mailing Address **17 COLBY CT.**

City **BEDFORD** State **NH** Zip Code **03110**

Purpose of Disbursement **OFFICE SUPPLIES**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **07 / 11 / 2014**

Amount of Each Disbursement this Period: **231.47**

Transaction ID : **SB17.I853**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. GOOGLE

Mailing Address **1600 AMPHITHEATRE PKWY**

City **MOUNTAIN VIEW** State **CA** Zip Code **94043**

Purpose of Disbursement **WEB SERVICES**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 07 / 2014**

Amount of Each Disbursement this Period: **275.00**

Transaction ID : **SB17.I1046**

SUBTOTAL of Disbursements This Page (optional)..... **275.00**

TOTAL This Period (last page this line number only).....

14020684614

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 463 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. GOOGLE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ONLINE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 03 / 2014

Amount of Each Disbursement this Period: 275.00

Transaction ID : SB17.I810

Category/Type

B. HARVEY'S EMBROIDERY & TEAM SALES

Full Name (Last, First, Middle Initial)

Mailing Address 610 ISLINGTON ST.

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement COLLATERAL-HATS & T-SHIRTS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period: 3527.50

Transaction ID : SB17.I1156

Category/Type

C. I360 LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 37046

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement DATA SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 08 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.I1048

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 6802.50

TOTAL This Period (last page this line number only).....

14020684615

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 464 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. JOHN P. MCCONNELL INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1210 R STREET NW #315
City WASHINGTON State DC Zip Code 20009
Purpose of Disbursement SPEECH WRITING SERVICES
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement: MM / DD / YYYY
07 / 03 / 2014

Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB17.1805

B. JOHNNYS HALF SHELL

Full Name (Last, First, Middle Initial)
Mailing Address 400 NORTH CAPITOL ST. NW
City WASHINGTON State DC Zip Code 20001
Purpose of Disbursement MEETING EXPENSE
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement: MM / DD / YYYY
07 / 16 / 2014

Amount of Each Disbursement this Period: 200.00
Transaction ID : SB17.1926

C. JOHNNYS HALF SHELL

Full Name (Last, First, Middle Initial)
Mailing Address 400 NORTH CAPITOL ST. NW
City WASHINGTON State DC Zip Code 20001
Purpose of Disbursement EVENT CATERING
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement: MM / DD / YYYY
07 / 24 / 2014

Amount of Each Disbursement this Period: 580.00
Transaction ID : SB17.1950

SUBTOTAL of Disbursements This Page (optional)..... 1780.00

TOTAL This Period (last page this line number only).....

14020684616

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 465 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. LG STRATEGIES LLC

Full Name (Last, First, Middle Initial)
Mailing Address 69 BIRON STREET

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
CAMPAIGN STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period
2500.00

Transaction ID : SB17.I795

Category/Type

B. LG STRATEGIES LLC

Full Name (Last, First, Middle Initial)
Mailing Address 69 BIRON STREET

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
CAMPAIGN STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 07 / 2014

Amount of Each Disbursement this Period
2500.00

Transaction ID : SB17.I807

Category/Type

C. LG STRATEGIES LLC

Full Name (Last, First, Middle Initial)
Mailing Address 69 BIRON STREET

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
CAMPAIGN STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
5000.00

Transaction ID : SB17.I984

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 10000.00

TOTAL This Period (last page this line number only).....

14020684617

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 466 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. LOVAS CO LLC

Full Name (Last, First, Middle Initial)
Mailing Address 6740 W. DEER VALLEY ROAD
STE. D-107 PMB 205

City GLENDALE State AZ Zip Code 85310

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
67.42

Transaction ID : SB17.I990

Category/Type

B. UPS

Full Name (Last, First, Middle Initial)
Mailing Address 373 S. WILLOW ST.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
67.42

Transaction ID : SB17.I991

[MEMO ITEM]

Category/Type

C. MADAKET CONSULTING LLC

Full Name (Last, First, Middle Initial)
Mailing Address 100 TRADE CENTER STE. G-700

City WOBURN, MA 01801 State Zip Code

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period
8000.00

Transaction ID : SB17.I821

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 8067.42

TOTAL This Period (last page this line number only).....

14020684618

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 467 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. MARRIOTT HOTELS

Mailing Address **10400 FERNWOOD ROAD**

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 28 / 2014

Amount of Each Disbursement this Period
162.41

Transaction ID : **SB17.I977**

Category/Type

Full Name (Last, First, Middle Initial)
B. MERCHANT E-SOLUTIONS

Mailing Address **3600 BRIDGE PARKWAY
STE. 102**

City **REDWOOD CITY** State **CA** Zip Code **94065**

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 07 / 2014

Amount of Each Disbursement this Period
4477.52

Transaction ID : **SB17.I1045**

Category/Type

Full Name (Last, First, Middle Initial)
C. MERCHANT E-SOLUTIONS

Mailing Address **3600 BRIDGE PARKWAY
STE. 102**

City **REDWOOD CITY** State **CA** Zip Code **94065**

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 03 / 2014

Amount of Each Disbursement this Period
3284.99

Transaction ID : **SB17.I800**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **7924.92**

TOTAL This Period (last page this line number only).....

14020684619

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 468 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. MOLLOY SOUND & VIDEO CONTRACTORS

Mailing Address **1200 MAMMOTH RD**

City **MANCHESTER** State **NH** Zip Code **03104**

Purpose of Disbursement
EVENT VIDEOGRAPHY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 11 / 2014

Amount of Each Disbursement this Period
350.00

Transaction ID : **SB17.I1051**

Category/Type

Full Name (Last, First, Middle Initial)
B. MULTI MEDIA SERVICES INC.

Mailing Address **915 KING ST. 2ND FL**

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement
MEDIA BUY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
140000.00

Transaction ID : **SB17.I1005**

Category/Type

Full Name (Last, First, Middle Initial)
C. MULTI MEDIA SERVICES INC.

Mailing Address **915 KING ST. 2ND FL**

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement
MEDIA BUY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 07 / 2014

Amount of Each Disbursement this Period
110000.00

Transaction ID : **SB17.I1043**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **250350.00**

TOTAL This Period (last page this line number only).....

14020684620

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 469 OF 485			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. MULTI MEDIA SERVICES INC.

Mailing Address 915 KING ST. 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA BUY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period: 105000.00

Transaction ID : SB17.I1150

Category/Type

Full Name (Last, First, Middle Initial)
B. MULTI MEDIA SERVICES INC.

Mailing Address 915 KING ST. 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA BUY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 10 / 2014

Amount of Each Disbursement this Period: 95000.00

Transaction ID : SB17.I837

Category/Type

Full Name (Last, First, Middle Initial)
C. MULTI MEDIA SERVICES INC.

Mailing Address 915 KING ST. 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA BUY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 17 / 2014

Amount of Each Disbursement this Period: 103000.00

Transaction ID : SB17.I923

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 303000.00

TOTAL This Period (last page this line number only).....

14020684621

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 470 OF 485			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. MULTI MEDIA SERVICES INC.

Full Name (Last, First, Middle Initial)
Mailing Address 915 KING ST. 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA BUY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 24 / 2014

Amount of Each Disbursement this Period: 140000.00

Transaction ID : SB17.I945

Category/Type

B. NET10 SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period: 111.42

Transaction ID : SB17.I1024

Category/Type

C. NET10 SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 07 / 2014

Amount of Each Disbursement this Period: 148.56

Transaction ID : SB17.I1047

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 140259.98

TOTAL This Period (last page this line number only).....

14020684622

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 471 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. NET10 SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 18 / 2014

Amount of Each Disbursement this Period: 37.14

Transaction ID : SB17.I1169

Category/Type

B. NET10 SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 07 / 2014

Amount of Each Disbursement this Period: 111.33

Transaction ID : SB17.I841

Category/Type

C. NET10 SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period: 148.44

Transaction ID : SB17.I844

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 296.91

TOTAL This Period (last page this line number only).....

14020684623

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 472 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. NET10 SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 09 / 2014

Amount of Each Disbursement this Period: 37.11

Transaction ID : SB17.I845

Category/Type

B. NET10 SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 9700 NW 112TH AVE.

City MIAMI State FL Zip Code 33178

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 18 / 2014

Amount of Each Disbursement this Period: 37.11

Transaction ID : SB17.I933

Category/Type

C. NORTH CONWAY GRAND HOTEL

Full Name (Last, First, Middle Initial)

Mailing Address 72 COMMON CT

City CONWAY State NH Zip Code 03860

Purpose of Disbursement LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period: 216.91

Transaction ID : SB17.I1167

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 291.13

TOTAL This Period (last page this line number only).....

14020684624

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 473 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. PINKERTON ACADEMY

Full Name (Last, First, Middle Initial)
Mailing Address 5 PINKERTON ST

City DERRY State NH Zip Code 03038

Purpose of Disbursement
EVENT FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period
1033.50

Transaction ID : SB17.I1148

Category/Type

B. PRINTERS SQUARE INC.

Full Name (Last, First, Middle Initial)
Mailing Address 105 FALTIN DR.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 08 / 2014

Amount of Each Disbursement this Period
7328.90

Transaction ID : SB17.I1049

Category/Type

C. PRINTERS SQUARE INC.

Full Name (Last, First, Middle Initial)
Mailing Address 105 FALTIN DR.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
SIGNS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 09 / 2014

Amount of Each Disbursement this Period
473.21

Transaction ID : SB17.I830

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 8835.61

TOTAL This Period (last page this line number only).....

14020684625

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 474 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. PRINTERS SQUARE INC.

Mailing Address 105 FALTIN DR.

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement PRINTING/STICKERS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 24 / 2014

Amount of Each Disbursement this Period: 2232.21

Transaction ID : SB17.I947

Category/Type

Full Name (Last, First, Middle Initial)
B. PROFESSIONAL DATA SERVICES INC.

Mailing Address 2470 DANIELLS BRIDGE ROAD STE. 121

City ATHENS State GA Zip Code 30606

Purpose of Disbursement FINANCIAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2014

Amount of Each Disbursement this Period: 5216.04

Transaction ID : SB17.I1149

Category/Type

Full Name (Last, First, Middle Initial)
C. PROFESSIONAL DATA SERVICES INC.

Mailing Address 2470 DANIELLS BRIDGE ROAD STE. 121

City ATHENS State GA Zip Code 30606

Purpose of Disbursement FINANCIAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period: 5078.48

Transaction ID : SB17.I786

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 12526.73

TOTAL This Period (last page this line number only).....

14020684626

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 475 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. PROFESSIONAL DATA SERVICES INC.

Mailing Address **2470 DANIELLS BRIDGE ROAD STE. 121**

City **ATHENS** State **GA** Zip Code **30606**

Purpose of Disbursement
FINANCIAL CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period
5205.33

Transaction ID : **SB17.I791**

Category/Type

Full Name (Last, First, Middle Initial)
B. PUBLIC SERVICE OF NEW HAMPSHIRE

Mailing Address **PO BOX 330**

City **MANCHESTER** State **NH** Zip Code **03105**

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2014

Amount of Each Disbursement this Period
655.10

Transaction ID : **SB17.I889**

Category/Type

Full Name (Last, First, Middle Initial)
C. RAINE GROUP LLC

Mailing Address **810 7TH AVE FL 39**

City **NEW YORK** State **NY** Zip Code **10019**

Purpose of Disbursement
EVENT FACILITY RENTAL/CATERING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2014

Amount of Each Disbursement this Period
2550.00

Transaction ID : **SB17.I1009**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **8410.43**

TOTAL This Period (last page this line number only).....

14020684627

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 476 OF 485			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. REACH COMMUNICATIONS

Mailing Address **83 GRANT ST.**

City **MANCHESTER** State **NH** Zip Code **03104**

Purpose of Disbursement **VOTER ID CALLS**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period
8750.00

Transaction ID : **SB17.I913**

Category/Type

Full Name (Last, First, Middle Initial)
B. REACH COMMUNICATIONS

Mailing Address **83 GRANT ST.**

City **MANCHESTER** State **NH** Zip Code **03104**

Purpose of Disbursement **VOTER ID CALLS**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 21 / 2014

Amount of Each Disbursement this Period
10500.00

Transaction ID : **SB17.I930**

Category/Type

Full Name (Last, First, Middle Initial)
C. RED OAK APARTMENTS

Mailing Address **289 PINE STREET**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement **OFFICE RENT EXPENSE**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : **SB17.I792**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **22250.00**

TOTAL This Period (last page this line number only).....

14020684628

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 477 OF 485	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)
A. RED OAK APARTMENTS

Mailing Address **289 PINE STREET**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement
OFFICE RENT EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : **SB17.I982**

Category/Type

Full Name (Last, First, Middle Initial)
B. RED OAK APARTMENTS

Mailing Address **289 PINE STREET**

City **MANCHESTER** State **NH** Zip Code **03103**

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period
1067.89

Transaction ID : **SB17.I983**

Category/Type

Full Name (Last, First, Middle Initial)
C. SCM ASSOCIATES INC.

Mailing Address **1283 MAIN STREET**

City **DUBLIN** State **NH** Zip Code **03444**

Purpose of Disbursement
DIRECT MAIL PRODUCTION

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2014

Amount of Each Disbursement this Period
52277.58

Transaction ID : **SB17.I1053**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **56345.47**

TOTAL This Period (last page this line number only).....

14020684629

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 478 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. SCM ASSOCIATES INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1283 MAIN STREET

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement DIRECT MAIL PRODUCTION/TELEMARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 02 / 2014

Amount of Each Disbursement this Period: 62695.25

Transaction ID : SB17.I797

Category/Type

B. SCM ASSOCIATES INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1283 MAIN STREET

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement DIRECT MAIL PRODUCTION/E-MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 22 / 2014

Amount of Each Disbursement this Period: 67122.28

Transaction ID : SB17.I942

Category/Type

C. SCR & ASSOCIATES LLC

Full Name (Last, First, Middle Initial)
Mailing Address 100 TRADE CENTER STE. G-700

City WOBURN State MA Zip Code 01801

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2014

Amount of Each Disbursement this Period: 9505.00

Transaction ID : SB17.I831

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 139322.53

TOTAL This Period (last page this line number only).....

14020684630

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 479 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. SKY LINE AERIAL ADS

Full Name (Last, First, Middle Initial)

Mailing Address **9A LAFAYETTE ROAD**

City **NORTH HAMPTON** State **NH** Zip Code **03862**

Purpose of Disbursement **ADVERTISING EXPENSE**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **07 / 01 / 2014**

Amount of Each Disbursement this Period: **550.00**

Transaction ID : **SB17.I796**

Category/Type

B. SOCIAL REFORM KITCHEN & BAR

Full Name (Last, First, Middle Initial)

Mailing Address **401 9TH STREET NW**

City **WASHINGTON** State **DC** Zip Code **20004**

Purpose of Disbursement **EVENT CATERING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **07 / 24 / 2014**

Amount of Each Disbursement this Period: **1445.23**

Transaction ID : **SB17.I949**

Category/Type

C. SOUTHWEST AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address **2702 LOVE FIELD DR.**

City **DALLAS** State **TX** Zip Code **75235**

Purpose of Disbursement **AIRFARE**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **07 / 18 / 2014**

Amount of Each Disbursement this Period: **488.00**

Transaction ID : **SB17.I932**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **2483.23**

TOTAL This Period (last page this line number only).....

14020684631

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

Full Name (Last, First, Middle Initial)

A. STRATHAM POLICE DEPARTMENT

Mailing Address 76 PORTSMOUTH AVE.

City STRATHAM State NH Zip Code 03885

Purpose of Disbursement
EVENT SECURITY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2014

Amount of Each Disbursement this Period

672.00

Transaction ID : SB17.1890

Category/ Type

Category/
Type

B. SWIFTCURRENT STRATEGIES

Mailing Address 186 CABOT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
DIGITAL CONSULTING/ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Amount of Each Disbursement this Period

26092.77

Transaction ID : SB17.11044

Category/ Type

Category/
Type

C. SWIFTCURRENT STRATEGIES

Mailing Address 186 CABOT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
ONLINE ADVERTISING/DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Amount of Each Disbursement this Period

12060.38

Transaction ID : SB17.1931

Category/ Type

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

38825.15

TOTAL This Period (last page this line number only).....

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14020684632

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 481 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. THE INN ON MAIN

Full Name (Last, First, Middle Initial)

Mailing Address 200 N. MAIN ST.

City WOLFEBORO State WN Zip Code 03894

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period: 216.91

Transaction ID : SB17.1843

Category/Type

B. THE PROSPER GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 435 EAST MAIN ST. STE. 250

City GREENWOOD State IN Zip Code 46143

Purpose of Disbursement
WEN HOSTING/DEVELOPMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 08 / 2014

Amount of Each Disbursement this Period: 4737.50

Transaction ID : SB17.11050

Category/Type

C. THE RIZZO DUKES GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 1316 ALEXANDRIA AVE.

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 06 / 2014

Amount of Each Disbursement this Period: 35460.85

Transaction ID : SB17.11042

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 40415.26

TOTAL This Period (last page this line number only).....

14020684633

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 482 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. THE RIZZO DUKES GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 1316 ALEXANDRIA AVE.

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2014

Amount of Each Disbursement this Period: 8000.00

Transaction ID : SB17.1828

Category/Type

B. US AIRWAYS

Full Name (Last, First, Middle Initial)
Mailing Address 111 W. RIO SALADO PARKWAY

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period: 534.20

Transaction ID : SB17.11023

Category/Type

C. US AIRWAYS

Full Name (Last, First, Middle Initial)
Mailing Address 111 W. RIO SALADO PARKWAY

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 17 / 2014

Amount of Each Disbursement this Period: 322.00

Transaction ID : SB17.1927

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 8856.20

TOTAL This Period (last page this line number only).....

14020684634

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 483 OF 485
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. US POSTMASTER

Full Name (Last, First, Middle Initial)
Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period: 5.05

Transaction ID : SB17.11025

Category/Type

B. US POSTMASTER

Full Name (Last, First, Middle Initial)
Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 07 / 2014

Amount of Each Disbursement this Period: 5.05

Transaction ID : SB17.1842

Category/Type

C. US POSTMASTER

Full Name (Last, First, Middle Initial)
Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 25 / 2014

Amount of Each Disbursement this Period: 5.05

Transaction ID : SB17.1957

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 15.15

TOTAL This Period (last page this line number only).....

14020684635

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 OF 485
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. WALDEN & ASSOCIATES

Full Name (Last, First, Middle Initial)
Mailing Address 4617 MONTROSE BLVD. STE. C202

City HOUSTON State TX Zip Code 77006

Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period: 66.06

Transaction ID : SB17.1988

Category/Type

B. FEDEX

Full Name (Last, First, Middle Initial)
Mailing Address 218 GRIFFIN RD

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2014

Amount of Each Disbursement this Period: 66.06

Transaction ID : SB17.1989

[MEMO ITEM]

Category/Type

C. WERPOLITICS LLC

Full Name (Last, First, Middle Initial)
Mailing Address 825 10TH STREET NW STE. 1079

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
ADVERTISING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 05 / 2014

Amount of Each Disbursement this Period: 13116.00

Transaction ID : SB17.I1022

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 13182.06

TOTAL This Period (last page this line number only).....

14020684636

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 485 OF 485
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE FOR SCOTT BROWN

A. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Full Name (Last, First, Middle Initial)
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Mailing Address 10 WATER ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement
EVENT TICKETS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 11 / 2014

Amount of Each Disbursement this Period
350.00

Transaction ID : SB17.I1052

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 350.00

TOTAL This Period (last page this line number only)..... 1362923.74

14020684637

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

8-28-14

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

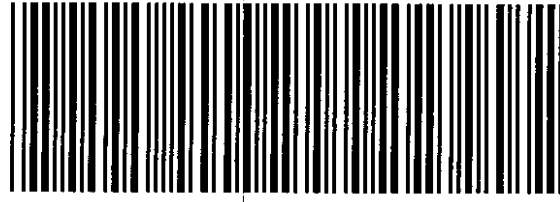
PREPARER

DH

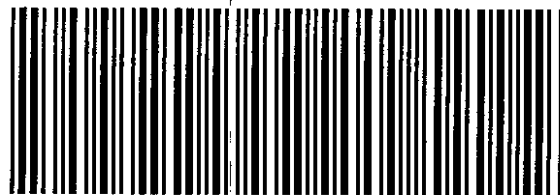
DATE PREPARED

8-28-14

14020684638



SEN PATCH



SEN PATCH

14020684639