

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Joanne Dowdell for Congress

ADDRESS (number and street) 1465 Woodbury Ave
PMB 400
 Check if different than previously reported. (ACC) Portsmouth NH 03801

2. **FEC IDENTIFICATION NUMBER** C C00495838 CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A) NH 01

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 M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2011 through 09 / 30 / 2011

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 Amy Meyerhoefer Tefft
Signature of Treasurer Amy Meyerhoefer Tefft *[Electronically Filed]* Date M M / D D / Y Y Y Y
10 / 15 / 2011

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Joanne Dowdell for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2011 To: M M / D D / Y Y Y Y 09 / 30 / 2011

| | 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)).... | 32425.00 | 127574.00 |
| (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))..... | 32425.00 | 127574.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 40180.73 | 43132.66 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 40180.73 | 43132.66 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 94191.34 | |
| 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)..... | 10523.19 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Joanne Dowdell for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2011 To: M M / D D / Y Y Y Y 09 / 30 / 2011

| 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)..... | 23625.00 | 97675.00 |
| (ii) Unitemized..... | 8800.00 | 24899.00 |
| (iii) TOTAL of contributions from individuals ▶ | 32425.00 | 122574.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 5000.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 32425.00 | 127574.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 10000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 10000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 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)..... ▶ | 32425.00 | 137574.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 40180.73 | 43132.66 |
| 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 | 250.00 | 250.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 40430.73 | 43382.66 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 102197.07 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 32425.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 134622.07 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 40430.73 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 94191.34 |

**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 44 |
| | <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 | |

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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Vickee Adams

Mailing Address 4307 161st St

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Urbandale | IA | 50323-2262 |

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

| | |
|------------------|------------------|
| Name of Employer | Occupation |
| Wells Fargo | Public Relations |

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2011

Transaction ID : C5520538

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
Daren Bascome

Mailing Address 195 W Springfield St

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Boston | MA | 02118 |

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

| | |
|------------------|------------------|
| Name of Employer | Occupation |
| Proverb | Founder/Director |

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2011

Transaction ID : C5734940

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
Donna Clifford

Mailing Address 225 Arlington St

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Medford | MA | 02155 |

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

| | |
|-----------------------|-----------------------|
| Name of Employer | Occupation |
| Rainbow Solutions Inc | Investment Consultant |

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2011

Transaction ID : C5734835

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 1000.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Donna Clifford

Mailing Address 225 Arlington St

City State Zip Code
Medford MA 02155

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

Name of Employer Occupation
Rainbow Solutions Inc Investment Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2011

Transaction ID : C5734836

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Virgis Colbert

Mailing Address 706 Eastwyn Bay Dr.

City State Zip Code
Thiensville WI 53092

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2011

Transaction ID : C5681510

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Cindy Cook

Mailing Address 601 E 20th St
Apt 9G

City State Zip Code
New York NY 10010-7635

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

Name of Employer Occupation
Self-Employed Fitness and Health

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2011

Transaction ID : C5681519

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Carol Cromer

Mailing Address 11702 Shadystone Terr

City Mitchellville State MD Zip Code 20721

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

Name of Employer Neibauer Dental Care Occupation Dental Hygienist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 04 / 2011

Transaction ID : C5487909

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Carol Cromer

Mailing Address 11702 Shadystone Terr

City Mitchellville State MD Zip Code 20721

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

Name of Employer Neibauer Dental Care Occupation Dental Hygienist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2011

Transaction ID : C5729722

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Farris L. Curry

Mailing Address 900 Bonifant St, Unit D

City Silver Spring State MD Zip Code 20910

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

Name of Employer Accent Designs Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2011

Transaction ID : C5739602

Amount of Each Receipt this Period
250.00

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

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

375.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

| | | | |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Allison Davis | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 13 / 2011 | |
| Mailing Address 3619 S State St Ste 400 | | Transaction ID : C5681499 | |
| City Chicago | State IL | Zip Code 60609 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer DAVIS DITTON LLC | Occupation Managing Partner | | |
| Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1500.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Gary Davis | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2011 | |
| Mailing Address 8070 crianza place apt 371 | | Transaction ID : C5724801 | |
| City vienna | State VA | Zip Code 22182 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer mwaa | Occupation mgr | | |
| Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Gordon Davis | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2011 | |
| Mailing Address 241 Central Park West | | Transaction ID : C5681520 | |
| City New York | State NY | Zip Code 10024 | Amount of Each Receipt this Period 750.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 750.00 | |
| Name of Employer Dewey LeBouef | Occupation Lawyer | | |
| Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 750.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | 1500.00 |

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Ken Doerr

Mailing Address 90 W Berlin Rd

City Bolton State MA Zip Code 01740-1309

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

Name of Employer Doerr Capital Occupation Managing Partner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2011

Transaction ID : C5726630

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Cathy Ellingwood

Mailing Address 44 Main St

City Newfields State NH Zip Code 03856-8312

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

Name of Employer Self Occupation Antiques

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : C5501067

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Steve Ellingwood

Mailing Address 44 Main St

City Newfields State NH Zip Code 03856-8312

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

Name of Employer ABB Occupation IT manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2011

Transaction ID : C5504096

Amount of Each Receipt this Period
 250.00

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

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

750.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
John Ellis

Mailing Address 1700 E 56th St

City Chicago State IL Zip Code 60637-1907

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

Name of Employer Self employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2011

Transaction ID : C5681441

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Linda Fairstein

Mailing Address

City State Zip Code

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2011

Transaction ID : C5681492

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Wanda A. Felton

Mailing Address 3003 Van Ness St. NW Apt. W801

City Washington State DC Zip Code 20008

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

Name of Employer Export/Import Bank of the United State Occupation Finance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : C5501160

Amount of Each Receipt this Period
 500.00

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

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

1000.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Hilda W Fleisher

Mailing Address 300 N. River Road

City Manchester State NH Zip Code 03104

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

Name of Employer Hilda W. Fleisher Occupation Attorney-Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2011

Transaction ID : C5734924

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
karen freed

Mailing Address 12007 whippoorwill lane

City rockville State MD Zip Code 20852

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

Name of Employer self Occupation social worker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2011

Transaction ID : C5731131

Amount of Each Receipt this Period
 150.00

C. Full Name (Last, First, Middle Initial)
David Grain

Mailing Address 607 Mourning Dove Drive

City Sarasota State FL Zip Code 34236

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

Name of Employer Grain Management, LLC Occupation Investor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2011

Transaction ID : C5681497

Amount of Each Receipt this Period
 1000.00

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

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

1400.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

| | | | |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Aunt Millie Henderson | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2011 | |
| Mailing Address 47 Edgewood Road | | Transaction ID : C5681533 | |
| City Rockville Centre | State NY | Zip Code 11570 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Information Requested | Occupation Information Requested | | |
| Receipt For: 2012 <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) B. Robert Holland | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011 | |
| Mailing Address 257 Soundview Ave | | Transaction ID : C5740740 | |
| City White Plains | State NY | Zip Code 10606 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2500.00 | |
| Name of Employer Essex Lake Group | Occupation Business Advisor | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5000.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. Glenn Ivey | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011 | |
| Mailing Address 2700 Valley Way | | Transaction ID : C5740249 | |
| City Cheverly | State MD | Zip Code 20785 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Venable LLP/PG County, MD | Occupation Attorney/PG County State's Attorney | | |
| Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 2850.00 |
| TOTAL This Period (last page this line number only)..... | [Empty Box] |

**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 13 OF 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Vikki Jenkins

Mailing Address 8710 Cameron St Apt 1523

City State Zip Code
Silver Spring MD 20910

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

Name of Employer Occupation
Self Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2011

Transaction ID : C5740443

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Vernon Jordan

Mailing Address 1333 New Hampshire Ave. NW

City State Zip Code
Washington DC 20035

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

Name of Employer Occupation
Lazard Freres & Co. LLC Senior Managing Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 13 2011

Transaction ID : C5681511

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Roger Joseph

Mailing Address 65 East India Row, Unit 35-F

City State Zip Code
Boston MA 02110

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

Name of Employer Occupation
Bingham McCutchen LLP Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 27 2011

Transaction ID : C5514414

Amount of Each Receipt this Period
250.00

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

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

850.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Andi Kasarsky

Mailing Address 1135 North Inglewood Street

City State Zip Code
Arlington VA 22205

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

Name of Employer Occupation
US Department of Energy Program Analyst

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2011

Transaction ID : C5740689

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Melodee S Kornacker

Mailing Address Po Box 218207

City State Zip Code
Columbus OH 43221

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2011

Transaction ID : C5727767

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Sandy Loewentheil

Mailing Address 6 Beverly Rd.

City State Zip Code
Purchase NY 10577

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2011

Transaction ID : C5691920

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Alvin S Lovell

Mailing Address 10 Cliton St Apt 3T

City Brooklyn State NY Zip Code 11201

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : C5740706

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Sharon Malone

Mailing Address 4246 50th St NW

City Washington State DC Zip Code 20016-1904

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

Name of Employer self Occupation physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2011

Transaction ID : C5681494

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
David Mason

Mailing Address 9 Warson Hills Ln.

City Saint Louis State MO Zip Code 63124

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

Name of Employer David Mason & Associates Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2011

Transaction ID : C5496397

Amount of Each Receipt this Period
500.00

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

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

950.00

**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 16 OF 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Bob Neily

Mailing Address **PO Box 272**

City **Stratham** State **NH** Zip Code **03885**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2011

Transaction ID : C5504132

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bob Neily

Mailing Address **PO Box 272**

City **Stratham** State **NH** Zip Code **03885**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 17 / 2011

Transaction ID : C5734913

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Bob Neily

Mailing Address **PO Box 272**

City **Stratham** State **NH** Zip Code **03885**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2011

Transaction ID : C5734829

Amount of Each Receipt this Period
200.00

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

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

550.00

**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 17 OF 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Janet Neily

Mailing Address **PO Box 272**

City **Stratham** State **NH** Zip Code **03885**

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

Name of Employer Information Requested
Information Requested

Occupation Information Requested
Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2011

Transaction ID : C5504133

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Amy O'Brien

Mailing Address **19 Stonehenge Road**

City **Montclair** State **NJ** Zip Code **07043**

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

Name of Employer Information Requested
TIAA-CREF

Occupation Information Requested
Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : C5736450

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Andre Porter

Mailing Address **4 Atherstone St**

City **Boston** State **MA** Zip Code **02124**

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

Name of Employer Information Requested
Information Requested

Occupation Information Requested
Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2011

Transaction ID : C5734833

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Walter Pryor JR

Mailing Address 1036 E. 48th Street

City Chicago State IL Zip Code 60615

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

Name of Employer Career Education Corp Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2011

Transaction ID : C5740681

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Jackie Randolph

Mailing Address 3307 Rollingwood Dr

City Woodbridge State VA Zip Code 22192-4436

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

Name of Employer U.S. Army Research Institute Occupation Supervisory Research Psychologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2011

Transaction ID : C5740097

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Janice Cook Roberts

Mailing Address 945 5th Ave

City New York State NY Zip Code 10021

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

Name of Employer Kohlberg Kravis Roberts & Co. Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2011

Transaction ID : C5681507

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Michael Ryan

Mailing Address 33 West 81st Street

City State Zip Code
New York NY 10024

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2011

Transaction ID : C5681512

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
David Sand

Mailing Address 15 Naples Rd

City State Zip Code
Brookline MA 02446

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

Name of Employer Information Requested Occupation Information Requested
CDT Advisors LLC Investment Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2011

Transaction ID : C5734928

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Ruth Scarville

Mailing Address 25 Langdon Blvd

City State Zip Code
Rockville Centre NY 11570-3602

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2011

Transaction ID : C5691932

Amount of Each Receipt this Period
 100.00

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

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

1850.00

**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 20 OF 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Cheryl Smith

Mailing Address 99 Clearwater Rd

City State Zip Code
Newton MA 02462

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

Name of Employer Occupation
Trillium Asset Management Portfolio Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2011

Transaction ID : C5734931

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Tiina Smith

Mailing Address 38 Coolidge Lane

City State Zip Code
Dedham MA 02026

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

Name of Employer Occupation
family mother

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2011

Transaction ID : C5725480

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Willard Stanback

Mailing Address 5 Keystone Way

City State Zip Code
West Windsor NJ 08550

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

Name of Employer Occupation
Willard Alonzo Stanback, PC Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2011

Transaction ID : C5740021

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 44 |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Michael Tarnow | | Date of Receipt MM / DD / YYYY 09 / 20 / 2011 |
| Mailing Address | | Transaction ID : C5734914 |
| City Boston | State MA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Information Requested | Occupation Information Requested | |
| Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Sara Truebridge | | Date of Receipt MM / DD / YYYY 08 / 10 / 2011 |
| Mailing Address 49 Emerald Dr. | | Transaction ID : C5675851 |
| City Danville | State CA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer self | Occupation education consultant | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5000.00 | |

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mark Watson | | Date of Receipt MM / DD / YYYY 09 / 22 / 2011 |
| Mailing Address PO Box 426 | | Transaction ID : C5734840 |
| City Harwichport | State MA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Keel Asset Management | Occupation Investment Advisor | |
| Receipt For: 2012 <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)..... | 3750.00 |
| TOTAL This Period (last page this line number only)..... | |

**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 22 OF 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Sidney Wigfall

Mailing Address 3108 S Route 59
Ste 124-306

City Naperville State IL Zip Code 60564-8021

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

Name of Employer SC Advisors Group Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2011

Transaction ID : C5730067

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Wesley Williams

Mailing Address 165 Court St.
#201

City Brooklyn State NY Zip Code 11201

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2011

Transaction ID : C5681495

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Wendy Wolf

Mailing Address 224 Valley Ridge Road

City Haverford State PA Zip Code 19041

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2011

Transaction ID : C5691925

Amount of Each Receipt this Period
 500.00

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

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

1000.00

**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 23 OF 44 |
| | <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)
Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial)
Susan Wood

Mailing Address 16 Harvey Lane

City Epping State NH Zip Code 03042-1704

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2011

Transaction ID : C5504130

Amount of Each Receipt this Period
 300.00

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
 M M / D D / Y Y Y Y Y Y

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

300.00

23625.00

**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 24 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Complete Payroll Processing | | Date of Disbursement |
| Mailing Address 7488 State Route 39 | | M M / D D / Y Y Y Y 08 / 30 / 2011 |
| City Perry | State NY | Zip Code 14530 |
| Purpose of Disbursement Payroll Invoice | Category/ Type 001 | Amount of Each Disbursement this Period 57.93 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : D415106 |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Complete Payroll Processing | | Date of Disbursement |
| Mailing Address 7488 State Route 39 | | M M / D D / Y Y Y Y 07 / 13 / 2011 |
| City Perry | State NY | Zip Code 14530 |
| Purpose of Disbursement Payroll Invoice | Category/ Type 001 | Amount of Each Disbursement this Period 84.09 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : D415558 |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Complete Payroll Processing | | Date of Disbursement |
| Mailing Address 7488 State Route 39 | | M M / D D / Y Y Y Y 07 / 13 / 2011 |
| City Perry | State NY | Zip Code 14530 |
| Purpose of Disbursement Payroll Tax | Category/ Type 001 | Amount of Each Disbursement this Period 1087.68 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : D415559 |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1229.70 |
| TOTAL This Period (last page this line number only)..... | |

**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 25 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Complete Payroll Processing | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2011 | |
| Mailing Address 7488 State Route 39 | | | Amount of Each Disbursement this Period 1530.77 | |
| City Perry | State NY | Zip Code 14530 | Transaction ID : D415560 | |
| Purpose of Disbursement Payroll Tax | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Complete Payroll Processing | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2011 | |
| Mailing Address 7488 State Route 39 | | | Amount of Each Disbursement this Period 56.08 | |
| City Perry | State NY | Zip Code 14530 | Transaction ID : D415562 | |
| Purpose of Disbursement Payroll Invoice | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. Complete Payroll Processing | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2011 | |
| Mailing Address 7488 State Route 39 | | | Amount of Each Disbursement this Period 1491.35 | |
| City Perry | State NY | Zip Code 14530 | Transaction ID : D415111 | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3078.20 |
| TOTAL This Period (last page this line number only)..... | |

**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 26 OF 44 | |
| | <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)
Joanne Dowdell for Congress

A. Complete Payroll Processing

Full Name (Last, First, Middle Initial)
Mailing Address 7488 State Route 39

City State Zip Code
Perry NY 14530

Purpose of Disbursement
Payroll Tax

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 13 / 2011

Amount of Each Disbursement this Period
629.00

Transaction ID : D417469

Category/Type
001

B. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE
Ste 2000

City State Zip Code
Atlanta GA 30342-4799

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 06 / 2011

Amount of Each Disbursement this Period
65.00

Transaction ID : D415086

Category/Type
001

c. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE
Ste 2000

City State Zip Code
Atlanta GA 30342-4799

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 06 / 2011

Amount of Each Disbursement this Period
256.52

Transaction ID : D415088

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 950.52

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

**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 27 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| A. First Data | | M M / D D / Y Y Y Y 09 / 06 / 2011 |
| Mailing Address 5565 Glenridge Connector NE Ste 2000 | | Amount of Each Disbursement this Period |
| City Atlanta State GA Zip Code 30342-4799 | Purpose of Disbursement Credit Card Processing Fees | 2.80 |
| Candidate Name | Category/Type 001 | Transaction ID : D415089 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| B. First Data | | M M / D D / Y Y Y Y 08 / 03 / 2011 |
| Mailing Address 5565 Glenridge Connector NE Ste 2000 | | Amount of Each Disbursement this Period |
| City Atlanta State GA Zip Code 30342-4799 | Purpose of Disbursement Credit Card Processing Fees | 591.89 |
| Candidate Name | Category/Type 001 | Transaction ID : D415090 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| C. First Data | | M M / D D / Y Y Y Y 08 / 03 / 2011 |
| Mailing Address 5565 Glenridge Connector NE Ste 2000 | | Amount of Each Disbursement this Period |
| City Atlanta State GA Zip Code 30342-4799 | Purpose of Disbursement Credit Card Processing Fees | 202.30 |
| Candidate Name | Category/Type 001 | Transaction ID : D415091 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 796.99 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-4799
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)
State: District:

Date of Disbursement: 08 / 03 / 2011
Amount of Each Disbursement this Period: 16.00
Transaction ID : D415095
Category/Type: 001

B. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-4799
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)
State: District:

Date of Disbursement: 07 / 05 / 2011
Amount of Each Disbursement this Period: 372.40
Transaction ID : D407173
Category/Type:

C. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-4799
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)
State: District:

Date of Disbursement: 07 / 05 / 2011
Amount of Each Disbursement this Period: 25.10
Transaction ID : D407174
Category/Type:

SUBTOTAL of Disbursements This Page (optional) 413.50
TOTAL This Period (last page this line number only)

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. First Data | | Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011 |
| Mailing Address 5565 Glenridge Connector NE Ste 2000 | | Amount of Each Disbursement this Period 800.70 Transaction ID : D407175 |
| City Atlanta | State GA Zip Code 30342-4799 | |
| Purpose of Disbursement Credit Card Processing Fees | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. McKenna Pihlaja | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2011 |
| Mailing Address 2263 12th PI NW | | Amount of Each Disbursement this Period 2796.36 Transaction ID : D415067 |
| City Washington | State DC Zip Code 20009-4405 | |
| Purpose of Disbursement Consultant - GC & Media | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McKenna Pihlaja | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2011 |
| Mailing Address 2263 12th PI NW | | Amount of Each Disbursement this Period 148.40 Transaction ID : D415068 |
| City Washington | State DC Zip Code 20009-4405 | |
| Purpose of Disbursement Consultant - GC & Media | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3745.46 |
| TOTAL This Period (last page this line number only)..... | |

**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 30 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | | | | |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. Howell Montgomery | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2011 | | |
| Mailing Address 16 Golden Meadow Rd | | | Amount of Each Disbursement this Period 2871.00 | | |
| City Hampstead | State NH | Zip Code 03841 | Transaction ID : D417468 | | |
| Purpose of Disbursement Payroll | | Category/ Type 001 | | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. Howell Montgomery | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011 | | |
| Mailing Address 16 Golden Meadow Rd | | | Amount of Each Disbursement this Period 185.38 | | |
| City Hampstead | State NH | Zip Code 03841 | Transaction ID : D415074 | | |
| Purpose of Disbursement Travel Reimbursement | | Category/ Type 001 | | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Next Level Partners | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2011 | | |
| Mailing Address PO Box 15320 | | | Amount of Each Disbursement this Period 1000.00 | | |
| City Washington | State DC | Zip Code 20003 | Transaction ID : D415069 | | |
| Purpose of Disbursement Consultant - Compliance | | Category/ Type | | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4056.38 |
| TOTAL This Period (last page this line number only)..... | |

**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 31 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

A. Next Level Partners

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 15320

City Washington State DC Zip Code 20003

Purpose of Disbursement
Consultant - Compliance

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2011

Amount of Each Disbursement this Period: 1500.00

Transaction ID : D407040

Category/Type: 001

B. NGP VAN

Full Name (Last, First, Middle Initial)
Mailing Address 1101 15th Street NW Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software services

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 18 / 2011

Amount of Each Disbursement this Period: 5500.00

Transaction ID : D405619

Category/Type: 001

c. Devan Julie Quinn

Full Name (Last, First, Middle Initial)
Mailing Address 16 Golden Meadow Rd

City Hampstead State NH Zip Code 03841-2389

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 02 / 2011

Amount of Each Disbursement this Period: 1741.17

Transaction ID : D415071

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 8741.17

TOTAL This Period (last page this line number only)

**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 32 OF 44 | |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2011 |
| Mailing Address 1981 Woodbury Ave | | Amount of Each Disbursement this Period 165.96 Transaction ID : D415062 |
| City Portsmouth | State NH Zip Code 03801-3230 | |
| Purpose of Disbursement Office Supplies | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. T-Mobile | | Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2011 |
| Mailing Address PO Box 37380 | | Amount of Each Disbursement this Period 83.15 Transaction ID : D407176 |
| City Albuquerque | State NM Zip Code 87176-7380 | |
| Purpose of Disbursement Cell Phone Service | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. T-Mobile | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011 |
| Mailing Address PO Box 37380 | | Amount of Each Disbursement this Period 81.19 Transaction ID : D415670 |
| City Albuquerque | State NM Zip Code 87176-7380 | |
| Purpose of Disbursement Phone | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 330.30 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 33 OF 44 | |
| | <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)
Joanne Dowdell for Congress

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. The Bresler Group | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011 | |
| Mailing Address 30 Longview Drive | | | Amount of Each Disbursement this Period 250.00 | |
| City Bow | State NH | Zip Code 03304 | Transaction ID : D415060 | |
| Purpose of Disbursement Campaign Materials | | 006 Category/ Type | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. United States Postal Service (USPS) | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011 | |
| Mailing Address 80 Daniel St | | | Amount of Each Disbursement this Period 105.60 | |
| City Portsmouth | State NH | Zip Code 03801-3850 | Transaction ID : D415672 | |
| Purpose of Disbursement Postage | | 001 Category/ Type | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. United States Postal Service (USPS) | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2011 | |
| Mailing Address 80 Daniel St | | | Amount of Each Disbursement this Period 88.00 | |
| City Portsmouth | State NH | Zip Code 03801-3850 | Transaction ID : D415802 | |
| Purpose of Disbursement Postage | | 001 Category/ Type | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 443.60 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. United States Postal Service (USPS) | | Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2011 |
| Mailing Address 80 Daniel St | | Amount of Each Disbursement this Period 88.00 |
| City Portsmouth State NH Zip Code 03801-3850 | Purpose of Disbursement Postage Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : D415812 |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. United States Postal Service (USPS) | | Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011 |
| Mailing Address 80 Daniel St | | Amount of Each Disbursement this Period 396.00 |
| City Portsmouth State NH Zip Code 03801-3850 | Purpose of Disbursement Postage Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : D417782 |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Howell Montgomery | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011 |
| Mailing Address 16 Golden Meadow Rd | | Amount of Each Disbursement this Period 889.26 |
| City Hampstead State NH Zip Code 03841 | Purpose of Disbursement Reimbursement Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : D405620 |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1373.26 |
| TOTAL This Period (last page this line number only)..... | |

**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 35 OF 44 | |
| | <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)
Joanne Dowdell for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. United States Postal Service (USPS) | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011 |
| Mailing Address 80 Daniel St | | Amount of Each Disbursement this Period 20.68 |
| City Portsmouth | State NH | |
| Zip Code 03801-3850 | Purpose of Disbursement Postage | Transaction ID : D407591 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011 |
| Mailing Address 4000 E Sky Harbor Blvd | | Amount of Each Disbursement this Period 286.80 |
| City Phoenix | State AZ | |
| Zip Code 85034-3802 | Purpose of Disbursement Travel | Transaction ID : D405621 |
| Candidate Name | Category/Type 002 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. US Airways | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011 |
| Mailing Address 4000 E Sky Harbor Blvd | | Amount of Each Disbursement this Period 120.40 |
| City Phoenix | State AZ | |
| Zip Code 85034-3802 | Purpose of Disbursement Air travel | Transaction ID : D407590 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**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 36 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verizon | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011 |
| Mailing Address 140 West St. | | Amount of Each Disbursement this Period 170.85 |
| City New York | State NY | |
| Zip Code 10007 | Purpose of Disbursement Cell phone | Transaction ID : D407241 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Joanne Dowdell | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011 |
| Mailing Address 83 Spinnaker Way | | Amount of Each Disbursement this Period 6089.68 |
| City Portsmouth | State NH | |
| Zip Code 03801-3330 | Purpose of Disbursement Reimbursement | Transaction ID : D415072 |
| Candidate Name Joanne Dowdell | Category/Type 001 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NH District: 01 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Dollar Rental Car | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011 |
| Mailing Address 7062 Elm Rd | | Amount of Each Disbursement this Period 339.83 |
| City Baltimore | State MD | |
| Zip Code 21240-1000 | Purpose of Disbursement Travel | Transaction ID : D415897 |
| Candidate Name | Category/Type 002 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 6089.68 |
| TOTAL This Period (last page this line number only)..... | |

**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 37 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. NGP VAN | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011 |
| Mailing Address 1101 15th Street NW Suite 500 | | Amount of Each Disbursement this Period 5500.00 |
| City Washington | State DC | |
| Zip Code 20005 | Purpose of Disbursement Software Services | Transaction ID : D415917 |
| Candidate Name | 001 Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" 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 M M / D D / Y Y Y Y 08 / 01 / 2011 |
| Mailing Address 1981 Woodbury Ave | | Amount of Each Disbursement this Period 34.45 |
| City Portsmouth | State NH | |
| Zip Code 03801-3230 | Purpose of Disbursement Office Supplies | Transaction ID : D415896 |
| Candidate Name | 001 Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Howell Montgomery | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011 |
| Mailing Address 16 Golden Meadow Rd | | Amount of Each Disbursement this Period 291.57 |
| City Hampstead | State NH | |
| Zip Code 03841 | Purpose of Disbursement Reimbursement | Transaction ID : D415073 |
| Candidate Name | 001 Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 291.57 |
| TOTAL This Period (last page this line number only)..... | |

**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 38 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verizon | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011 |
| Mailing Address 140 West St. | | Amount of Each Disbursement this Period 4612.17 |
| City New York | State NY | |
| Purpose of Disbursement Phone Bill | Candidate Name | Transaction ID : D415084 |
| Category/Type 001 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Complete Payroll Processing | | Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2011 |
| Mailing Address 7488 State Route 39 | | Amount of Each Disbursement this Period 2871.00 |
| City Perry | State NY | |
| Purpose of Disbursement Payroll | Candidate Name | Transaction ID : D415104 |
| Category/Type 001 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Howell Montgomery | | Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2011 |
| Mailing Address 16 Golden Meadow Rd | | Amount of Each Disbursement this Period 4612.17 |
| City Hampstead | State NH | |
| Purpose of Disbursement Payroll | Candidate Name | Transaction ID : D415108 |
| Category/Type 001 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4612.17 |
| TOTAL This Period (last page this line number only)..... | |

**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 39 OF 44 | | | |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Devan Julie Quinn | | Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2011 |
| Mailing Address 16 Golden Meadow Rd | | Amount of Each Disbursement this Period 1741.17 |
| City Hampstead | State NH | |
| Zip Code 03841-2389 | Purpose of Disbursement Payroll | Transaction ID : D415109 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Complete Payroll Processing | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2011 |
| Mailing Address 7488 State Route 39 | | Amount of Each Disbursement this Period 2871.00 |
| City Perry | State NY | |
| Zip Code 14530 | Purpose of Disbursement Payroll | Transaction ID : D415110 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Howell Montgomery | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2011 |
| Mailing Address 16 Golden Meadow Rd | | Amount of Each Disbursement this Period 2871.00 |
| City Hampstead | State NH | |
| Zip Code 03841 | Purpose of Disbursement Payroll | Transaction ID : D415116 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2871.00 |
| TOTAL This Period (last page this line number only)..... | |

**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 40 OF 44 | |
| | <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)
Joanne Dowdell for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Mr. Howell Montgomery | | Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2011 |
| Mailing Address 16 Golden Meadow Rd | | Amount of Each Disbursement this Period 920.77 Transaction ID : D415530 |
| City Hampstead | State NH | |
| Zip Code 03841 | Purpose of Disbursement Reimbursement | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Ritz Carlton | | Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2011 |
| Mailing Address 2 West Street | | Amount of Each Disbursement this Period 39.20 Transaction ID : D415549 [MEMO ITEM] |
| City New York | State NY | |
| Zip Code 10004 | Purpose of Disbursement Meal | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Ritz Carlton | | Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2011 |
| Mailing Address 2 West Street | | Amount of Each Disbursement this Period 389.00 Transaction ID : D415551 [MEMO ITEM] |
| City New York | State NY | |
| Zip Code 10004 | Purpose of Disbursement Hotel | Category/ Type 002 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 920.77 |
| TOTAL This Period (last page this line number only)..... | |

**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 41 OF 44 | |
| | <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)
Joanne Dowdell for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Verizon | | Date of Disbursement MM / DD / YYYY 08 / 24 / 2011 |
| Mailing Address 140 West St. | | Amount of Each Disbursement this Period \$ 135.29 |
| City New York | State NY | |
| Zip Code 10007 | Purpose of Disbursement Phone Bill | Transaction ID : D415553 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | Category/Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: |
| | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | Category/Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: |
| | | |

| | |
|---|-------------|
| SUBTOTAL of Disbursements This Page (optional)..... | \$ 0.00 |
| TOTAL This Period (last page this line number only)..... | \$ 39944.27 |

**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 42 OF 44 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joanne Dowdell for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. New Hampshire Democratic Party | | Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2011 |
| Mailing Address 101 N State St | | Amount of Each Disbursement this Period 250.00 Transaction ID : D415065 |
| City Concord State NH Zip Code 03301-4351 | Purpose of Disbursement Political Contribution <input type="checkbox"/> 011 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Purpose of Disbursement Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Purpose of Disbursement Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 250.00 |
| TOTAL This Period (last page this line number only)..... | 250.00 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Joanne Dowdell for Congress** Transaction ID : **L874**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Ms. Joanne Dowdell PERS FUNDS
 Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
83 Spinnaker Way
 City State ZIP Code
 Portsmouth NH 03801-3330

| | | |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan 10000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 10000.00 |
|-------------------------------------|------------------------------------|---|

TERMS
 Date Incurred: M 06 / D 30 / Y 2011
 Date Due: M / D / Y 12/31/2012
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | | |
|--|---|----------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | 10000.00 |
| TOTALS This Period (last page in this line only)..... | ▶ | 10000.00 |

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Joanne Dowdell for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mr. Howell Montgomery

Mailing Address 16 Golden Meadow Rd

City State Zip Code
 Hampstead NH 03841

Nature of Debt (Purpose):
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D402151**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ms. Joanne Dowdell

Mailing Address 83 Spinnaker Way

City State Zip Code
 Portsmouth NH 03801-3330

Nature of Debt (Purpose):
 Reimbursement

Outstanding Balance Beginning This Period **Transaction ID : D403748**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

| | |
|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional) | <input type="text" value="523.19"/> |
| 2) TOTALS This Period (last page this line number only) | <input type="text" value="523.19"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text" value="10000.00"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="10523.19"/> |