

REPORT OF RECEIPTS AND DISBURSEMENTS
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 45

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

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

<input type="checkbox"/> April 15 Quarterly Report <input checked="" type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	Monthly Report Due On: <table style="width:100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table> <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____ <input type="checkbox"/> Thirtieth day report following the General Election on _____ on _____	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31
<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20											
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20											
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20											
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31											

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 04/01/2009	THROUGH 06/30/2009
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SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	183440.34
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	0.00
8. SUBTOTAL (Lines 6 and 7)	.....	183440.34
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	27456.98
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	155983.36
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	298992.24
13. EXPENDITURES SUBJECT TO LIMITATION	.....	15467726.86
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	.....	9451753.20
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	.....	15473266.86

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer Kathryn Damato	Date 07/15/2009
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Signature of Treasurer

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

For further information contact:	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 3P (01/2001)
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DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full) Chris Dodd For President Inc		Report Covering the Period From: 04/01/2009 To: 06/30/2009	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	1961741.71	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	0.00	10084755.20	
(b) Political Party Committees	0.00	100.00	
(c) Other Political Committees	0.00	750698.30	
(d) The Candidate	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	0.00	10835553.50	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	4739005.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00	
(b) Other Loans	0.00	1302811.25	
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	1302811.25	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	0.00	87687.02	
(b) Fundraising	0.00	5540.00	
(c) Legal and Accounting	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	93227.02	
21. OTHER RECEIPTS (Dividend, Interest, etc.)	0.00	55536.06	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	0.00	18987874.54	
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	27456.98	15560953.88	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	440110.00	
25. FUNDRAISING DISBURSEMENTS	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00	
(b) Other Repayments	0.00	1302811.25	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	1302811.25	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	0.00	1206542.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	177258.30	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	1383800.30	
29. OTHER DISBURSEMENTS	0.00	11000.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	27456.98	18698675.43	
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00		

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 45
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	695420.15
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	2631492.25	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	68.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	3358967.62

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD96F7AC4DCE345F38AC</p> <p>Date of Disbursement 04 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 71.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B78073262175F484CB61</p> <p>Date of Disbursement 04 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 77.98</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3B84CF57C801468BBA8</p> <p>Date of Disbursement 05 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 90.04</p>

SUBTOTAL of Disbursements This Page (optional) ▶

239.02

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFA96B2925E694984869</p> <p>Date of Disbursement 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 72.79</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B021328D68BCE478BA5E</p> <p>Date of Disbursement 06 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 72.79</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6854A2254428429BB7E</p> <p>Date of Disbursement 06 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 72.79</p>

SUBTOTAL of Disbursements This Page (optional) ▶

218.37

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Aristotle Publishing Mailing Address 205 Pennsylvania Ave City Washington State DC Zip Code 20003 Purpose of Disbursement Subscription Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B26ABD6BF5917487DB7A Date of Disbursement 05 / 01 / 2009 Amount of Each Disbursement this Period 6000.00
B.	Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 915 South 500 East, Ste. 200 City American Fork State UT Zip Code 84003-3373 Purpose of Disbursement Monthly Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B2376627BF4314C6FA38 Date of Disbursement 04 / 02 / 2009 Amount of Each Disbursement this Period 25.00
C.	Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 915 South 500 East, Ste. 200 City American Fork State UT Zip Code 84003-3373 Purpose of Disbursement Monthly Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B813A9014ED3D4E58BF2 Date of Disbursement 05 / 04 / 2009 Amount of Each Disbursement this Period 25.00

SUBTOTAL of Disbursements This Page (optional) ▶

6050.00

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

Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 915 South 500 East, Ste. 200 City American Fork State UT Zip Code 84003-3373 Purpose of Disbursement Monthly Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB4CCFCACF8114B278B6 Date of Disbursement 06 / 02 / 2009 Amount of Each Disbursement this Period 25.00
B.	Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7896E13C20B644A59D4 Date of Disbursement 04 / 01 / 2009 Amount of Each Disbursement this Period 71.56
C.	Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B4AA1CB125B0F4A3B9F8 Date of Disbursement 04 / 15 / 2009 Amount of Each Disbursement this Period 40.31

SUBTOTAL of Disbursements This Page (optional) ▶

136.87

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

Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BA76F17DBACA44459BF7 Date of Disbursement 05 / 01 / 2009 Amount of Each Disbursement this Period 40.31
B.	Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9995FD58BBA142A99FE Date of Disbursement 05 / 15 / 2009 Amount of Each Disbursement this Period 40.31
C.	Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B45B68BD2F2BD4B699D6 Date of Disbursement 06 / 01 / 2009 Amount of Each Disbursement this Period 357.29

SUBTOTAL of Disbursements This Page (optional) ▶	437.91
TOTAL This Period (last page this line number only) ▶	[]

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B3DF995D9445C42CAAB8 Date of Disbursement 06 / 15 / 2009 Amount of Each Disbursement this Period 40.31
B.	Full Name (Last, First, Middle Initial) IRS Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7B2B51B58D6746A5B3B Date of Disbursement 04 / 01 / 2009 Amount of Each Disbursement this Period 365.03
C.	Full Name (Last, First, Middle Initial) IRS Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCD1384F020044A28A11 Date of Disbursement 04 / 15 / 2009 Amount of Each Disbursement this Period 365.05

SUBTOTAL of Disbursements This Page (optional) ▶

770.39

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 45

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

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

A.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B98E94EBF1A56412AB99 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 365.05
B.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B4FC2F635A9F341059E8 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 365.05
C.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B6BCA8489400E428F9A2 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2884.70

SUBTOTAL of Disbursements This Page (optional) ▶	3614.80
TOTAL This Period (last page this line number only) ▶	(Empty box)

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 45

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B36E84781948E4CF09E6 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 365.03
B.	Full Name (Last, First, Middle Initial) Wired for Change, Inc. <hr/> Mailing Address 1700 Connecticut Ave., NW Suite 403 <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement Internet Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCB8F6BB177A64A89B5F Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2400.00
C.	Full Name (Last, First, Middle Initial) Wired for Change, Inc. <hr/> Mailing Address 1700 Connecticut Ave., NW Suite 403 <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement List Management Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BBCBB600AB7984AE4BB7 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1600.00

SUBTOTAL of Disbursements This Page (optional) ▶

4365.03

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 45

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

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

A. Full Name (Last, First, Middle Initial) Kathryn Damato <hr/> Mailing Address 10 Blackhawk Lane <hr/> City West Hartford State CT Zip Code 06117-2903 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B044E15CD0E184F05860 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 174.83
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Kathryn Damato <hr/> Mailing Address 10 Blackhawk Lane <hr/> City West Hartford State CT Zip Code 06117-2903 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B4E80CDDDB767E4440A1A Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 4629.92
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Kathryn Damato <hr/> Mailing Address 10 Blackhawk Lane <hr/> City West Hartford State CT Zip Code 06117-2903 <hr/> Purpose of Disbursement Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF58C7D3D66794781936 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2376.65
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

7181.40

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 45

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

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

A.

Full Name (Last, First, Middle Initial)
Kathryn Damato

Mailing Address 10 Blackhawk Lane

City State Zip Code
West Hartford CT 06117-2903

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: BDAF83E8C6FEF4FFE9C3

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1074.84

SUBTOTAL of Disbursements This Page (optional)

1074.84

TOTAL This Period (last page this line number only)

27313.13

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional).....	112136.07
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 16 / 45
 FOR LINE NUMBER: (check only one) 11 12

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

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="7233.31"/>	Transaction ID: D3239DDE2C2B14D02B40						
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Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="7233.31"/>					

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

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cox Communications	Nature of Debt (Purpose): Internet Services						
Mailing Address PO Box 6059							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Cypress</td> <td>CA</td> <td>90630</td> </tr> </table>	City	State	ZIP Code	Cypress	CA	90630	
City	State	ZIP Code					
Cypress	CA	90630					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="138.02"/>	Transaction ID: DEAECEB41D358C496EAEB						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="138.02"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="138.02"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="138.02"/>					

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 / 45	
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/>	11
	<input checked="" type="checkbox"/>	12

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

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

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

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

Outstanding Balance Beginning This Period 107.00	Transaction ID: D3BEB98490D8F4B87A07	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 107.00

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

Outstanding Balance Beginning This Period 160.24	Transaction ID: D80871DA60A7642ADAA1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 160.24

1) SUBTOTALS This Period This Page (optional).....	▶	703.84
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

Outstanding Balance Beginning This Period 1055.11	Transaction ID: D561E5E0579E7422A8F4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1055.11

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

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

1) SUBTOTALS This Period This Page (optional).....	52119.27
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

Outstanding Balance Beginning This Period 378.82		Transaction ID: DF4A4422265684FB29B9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 378.82	

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

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

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

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

1) SUBTOTALS This Period This Page (optional).....	794.78
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

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

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

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

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

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

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

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

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

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

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

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

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 22 / 45
 FOR LINE NUMBER: (check only one) 11 12

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Monthly Phone Charges						
Mailing Address 8808 Irvine Center Drive							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Irvine</td> <td>CA</td> <td>92618-4201</td> </tr> </table>	City	State	ZIP Code	Irvine	CA	92618-4201	
City	State	ZIP Code					
Irvine	CA	92618-4201					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="364.55"/>	Transaction ID: DC3EE07A89ADF414596B						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="364.55"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="364.55"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="364.55"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Old Town Family Restaurant	Nature of Debt (Purpose): Food & Beverage						
Mailing Address 2107 Camanche Avenue							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Clinton</td> <td>IA</td> <td>52732-6036</td> </tr> </table>	City	State	ZIP Code	Clinton	IA	52732-6036	
City	State	ZIP Code					
Clinton	IA	52732-6036					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="130.00"/>	Transaction ID: D8B59DA12044449C0AE9						
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Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="130.00"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MoreSound Company	Nature of Debt (Purpose): Sound Equipment						
Mailing Address 102 North Street							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Jaffrey</td> <td>NH</td> <td>03452-5301</td> </tr> </table>	City	State	ZIP Code	Jaffrey	NH	03452-5301	
City	State	ZIP Code					
Jaffrey	NH	03452-5301					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="400.00"/>	Transaction ID: D4310E2A2AC3D49AFB1C						
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Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="400.00"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="894.55"/>
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3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

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

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional).....	1663.39
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

Outstanding Balance Beginning This Period <input type="text" value="58.58"/>	Transaction ID: DC07FD8583E3F4BA58CA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="58.58"/>

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

Outstanding Balance Beginning This Period <input type="text" value="657.85"/>	Transaction ID: D160BB52601F3469FBFA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="657.85"/>

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

Outstanding Balance Beginning This Period <input type="text" value="677.36"/>	Transaction ID: DF660180FF5C543E886F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="677.36"/>

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4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

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

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

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

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

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

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

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

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

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

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

Outstanding Balance Beginning This Period 1056.76	Transaction ID: D7FB209F7C488450BA73	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1056.76

1) SUBTOTALS This Period This Page (optional).....	▶	2556.82
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

Outstanding Balance Beginning This Period	Transaction ID: D5E78BD6138D849C8A7B	
1535.76		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1535.76

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

Outstanding Balance Beginning This Period	Transaction ID: DF8C3EA191F814F5C94C	
250.36		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	250.36

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

Outstanding Balance Beginning This Period	Transaction ID: D142C4EE26CC3459DA22	
150.09		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	150.09

1) SUBTOTALS This Period This Page (optional).....	1936.21
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

Outstanding Balance Beginning This Period 351.30		Transaction ID: D3A3A16E658A34B44B21	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 351.30	

1) SUBTOTALS This Period This Page (optional).....	▶	7261.58
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

Outstanding Balance Beginning This Period		Transaction ID: D054E2AB68F284AAA9A7	
513.74			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	513.74	

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

Outstanding Balance Beginning This Period		Transaction ID: D77C21BCA099B4529A8B	
130.78			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	130.78	

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

Outstanding Balance Beginning This Period		Transaction ID: D1327435AF7974016BBD	
197.56			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	197.56	

1) SUBTOTALS This Period This Page (optional).....	▶	842.08
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

Outstanding Balance Beginning This Period 6277.73		Transaction ID: D0A801840ADAA424FBF4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6277.73	

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

Outstanding Balance Beginning This Period 22.28		Transaction ID: DF9E84213BC0C4FA4959	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.28	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VFW Post 775			Nature of Debt (Purpose): Space Rental
Mailing Address 702 West Main Street			
City Ottumwa	State IA	ZIP Code 52501-2226	

Outstanding Balance Beginning This Period 150.00		Transaction ID: D9F4487EF4F6F4DB6923	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00	

1) SUBTOTALS This Period This Page (optional).....	▶	6450.01
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

Outstanding Balance Beginning This Period 896.07		Transaction ID: D03866EA927C6487BAA8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 896.07	

1) SUBTOTALS This Period This Page (optional).....	2200.50
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER:
 (check only one) 11
 12

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

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

Outstanding Balance Beginning This Period <input type="text" value="694.96"/>		Transaction ID: D7AA2635D35294D99959	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="694.96"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="647.11"/>		Transaction ID: DC05308729895455AAF0	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="647.11"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="1646.22"/>		Transaction ID: D684E05F5028F4B9FA8C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1646.22"/>	

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3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	1231.50
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 35 / 45
 FOR LINE NUMBER: (check only one) 11 12

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

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="32.50"/>	Transaction ID: DCDE895EA2CFC4A338ED
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="32.50"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mediacom	Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 5744	
City State ZIP Code Carol Stream IL 60197-5744	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="19.14"/>	Transaction ID: DBAEE80A9C8F14CBF964
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="19.14"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mediacom	Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 5744	
City State ZIP Code Carol Stream IL 60197-5744	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="92.37"/>	Transaction ID: D34D4235A01F441BAA58
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="92.37"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="144.01"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

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

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

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

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

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

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
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NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

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

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

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

Outstanding Balance Beginning This Period		Transaction ID: D8A78FBAECFAE431F9D3	
83.52			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	83.52	

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	3120.60
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 / 45	
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/>	11
	<input checked="" type="checkbox"/>	12

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

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

Outstanding Balance Beginning This Period <input type="text" value="78.77"/>	Transaction ID: D2F929A7374FC4A50B84	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="78.77"/>

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

Outstanding Balance Beginning This Period <input type="text" value="811.87"/>	Transaction ID: DF6D9496BDF604118AD8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="811.87"/>

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

Outstanding Balance Beginning This Period <input type="text" value="92.50"/>	Transaction ID: DECE5259C4BB240ADBB7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="92.50"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="983.14"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 / 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

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

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

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

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

Outstanding Balance Beginning This Period 1481.16	Transaction ID: DDFA00C779CF445C8AA6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1481.16

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

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

1) SUBTOTALS This Period This Page (optional).....	▶ 16720.20
2) TOTALS This Period (last page this line number only).....	▶
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

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

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional).....	55636.74
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 41 / 45
 FOR LINE NUMBER: (check only one) 11 12

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

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1199.40"/>	Transaction ID: DF4C21A8864FF4D46B53
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="1199.40"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="59.95"/>	Transaction ID: DD71C9A3EFA0F4512B37
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="59.95"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="623.00"/>	Transaction ID: D4FFB54806211448B923
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="623.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1882.35"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 42 / 45
 FOR LINE NUMBER: (check only one) 11 12

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

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="280.43"/>	Transaction ID: D65530D3150B143C5BDD
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="280.43"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="748.02"/>	Transaction ID: DAC0405B098BA40BDB8F
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="748.02"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="3197.74"/>	Transaction ID: D80F5A221749E4D8CAFD
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="3197.74"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="4226.19"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

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

Outstanding Balance Beginning This Period		Transaction ID: D5880C9A067654615B51	
120.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	120.00	

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

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

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

1) SUBTOTALS This Period This Page (optional).....	▶	4579.53
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

Outstanding Balance Beginning This Period <input type="text" value="136.05"/>		Transaction ID: DF477C3FE35E04A05B7F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="136.05"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

Outstanding Balance Beginning This Period <input type="text" value="2327.31"/>		Transaction ID: D0A1C9B9020DA4F7F9B3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2327.31"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

Outstanding Balance Beginning This Period <input type="text" value="485.08"/>		Transaction ID: DC5C4695FC2C6478F875	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="485.08"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2948.44"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 / 45	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

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

1) SUBTOTALS This Period This Page (optional).....	411.45
2) TOTALS This Period (last page this line number only).....	298992.24
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	298992.24