

SECRETARY OF THE SENATE  
**SEN-365**

09 APR 15 PM 2:02

Office Use Only

# FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT ▼** Example: If typing, type over the lines

Friends of Bernie Sanders

ADDRESS (number and street) **▼** P.O. Box 391

Check if different than previously reported. (ACC) Burlington VT 05402

2. FEC IDENTIFICATION NUMBER **▼** C00411330

CITY **▲** STATE **▲** ZIP CODE **▲** STATE **▼** DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

VT 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

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

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

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2009 through 03 31 2009

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 Martha Abbott *Martha Abbott*

Signature of Treasurer Electronically Filed by Martha Abbott Date 04 08 2009

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

Office Use Only								
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**FEC FORM 3**  
(Revised 02/2003)

29020143332

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Bernie Sanders

Report Covering the Period: From: <sup>M M</sup> 0 1 <sup>D D</sup> 0 1 <sup>Y Y Y Y</sup> 2 0 0 9 To: <sup>M M</sup> 0 3 <sup>D D</sup> 3 1 <sup>Y Y Y Y</sup> 2 0 0 9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	33549.33	118124.83
(b) Total Contribution Refunds (from Line 20(d)).....	50.00	8178.21
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	33499.33	109946.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	24063.36	705886.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	110839.31
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	24063.36	595047.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	52295.89	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

29020143333

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name  
Friends of Bernie Sanders

Report Covering the Period: From: <sup>M M</sup> 0 1 <sup>D D</sup> 0 1 <sup>Y Y Y Y</sup> 2 0 0 9 To: <sup>M M</sup> 0 3 <sup>D D</sup> 3 1 <sup>Y Y Y Y</sup> 2 0 0 9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22760.58	34108.30
(ii) Unitemized.....	2788.75	34199.89
(iii) TOTAL of contributions from individuals..... ▶	25549.33	68333.19
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	8000.00	49791.64
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	33549.33	118124.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	110839.31
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	945.78	23298.43
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	34495.11	252262.57

29020143334

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24063.36	705886.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1484.70
(b) Political Party Committees.....	50.00	1693.51
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	50.00	8178.21
21. OTHER DISBURSEMENTS.....	200.00	340.85
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	24313.36	714405.72

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42114.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	34495.11
25. SUBTOTAL (add Line 23 and Line 24).....	76609.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24313.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	52295.89

29020143335

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

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

FOR LINE NUMBER: PAGE 5 / 31

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b> Full Name (Last, First, Middle Initial) Hank Abbott Mailing Address 108 Lenett Rd		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9 Transaction ID: C3433799
City State Zip Code Newton Center MA 02459	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2012 X Primary General Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Hank Abbott Mailing Address 108 Lenett Rd		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9 Transaction ID: C3432579
City State Zip Code Newton Center MA 02459	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2012 X Primary General Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Wylie Aitken Mailing Address 3 MacArthur Place #800		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9 Transaction ID: C3433808
City State Zip Code Santa Ana CA 92707	Amount of Each Receipt this Period 2400.00	
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2012 X Primary General Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) ..... ► 2900.00

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

29020143336

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

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

FOR LINE NUMBER: PAGE 6 / 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

**A.**

Full Name (Last, First, Middle Initial) Aris Anagnos			Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009	
Mailing Address 8124 West Third St., Ste 200			Transaction ID: C3432545	
City Los Angeles	State CA	Zip Code 90048	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self		Occupation Realtor		
Receipt For: 2012 X Primary General Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		

**B.**

Full Name (Last, First, Middle Initial) Aris Anagnos			Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2009	
Mailing Address 8124 West Third St., Ste 200			Transaction ID: C3432540	
City Los Angeles	State CA	Zip Code 90048	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self		Occupation Realtor		
Receipt For: 2012 X Primary General Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		

**C.**

Full Name (Last, First, Middle Initial) Cindy Asner			Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009	
Mailing Address 3556 Mound View Ave			Transaction ID: C3432546	
City Studio City	State CA	Zip Code 91604	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested		Occupation Information Requested		
Receipt For: 2012 X Primary General Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) .....	▶	2250.00
TOTAL This Period (last page this line number only) .....	▶	

29020143337

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 31
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b>	Full Name (Last, First, Middle Initial) Scott Brown		Date of Receipt	
	Mailing Address 356 Martindale Rd		M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: C3433801
	Shelburne	VT	05482	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		250.00		
Name of Employer Information Requested		Occupation Information Requested		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012		Election Cycle-to-Date ▼		
X Primary General Other (specify) ▼		500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott Brown		Date of Receipt	
	Mailing Address 356 Martindale Rd		M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: C3432581
	Shelburne	VT	05482	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		250.00		
Name of Employer Information Requested		Occupation Information Requested		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012		Election Cycle-to-Date ▼		
X Primary General Other (specify) ▼		500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Unitemized Contributor		Date of Receipt	
	Mailing Address Unitemized cash donations events		M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: C3434820
	Abnaki	VT	99999	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		190.58		
Name of Employer Information Requested		Occupation Information Requested		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012		Election Cycle-to-Date ▼		
X Primary General Other (specify) ▼		360.58		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>690.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

29020143338

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 31	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b>	Full Name (Last, First, Middle Initial) Unitemized Contributor		Date of Receipt
	Mailing Address Unitemized cash donations events		M M / D D / Y Y Y Y 03 / 15 / 2009
	City	State	Zip Code
	Abnaki	VT	99999
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C3434822
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period  170.00
Receipt For: 2012		Election Cycle-to-Date ▼	
X Primary General Other (specify) ▼		360.58	
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

<b>B.</b>	Full Name (Last, First, Middle Initial) Eddie Glover		Date of Receipt
	Mailing Address 2515 College Ave		M M / D D / Y Y Y Y 03 / 09 / 2009
	City	State	Zip Code
	Conway	AR	72034
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C3432554
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period  250.00
Receipt For: 2012		Election Cycle-to-Date ▼	
X Primary General Other (specify) ▼		250.00	
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert J. Hall		Date of Receipt
	Mailing Address 17671 Irvine Blvd, Ste. 103		M M / D D / Y Y Y Y 03 / 09 / 2009
	City	State	Zip Code
	Tustin	CA	92780
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C3432558
Name of Employer information requested		Occupation information requested	Amount of Each Receipt this Period  500.00
Receipt For: 2012		Election Cycle-to-Date ▼	
X Primary General Other (specify) ▼		500.00	
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>920.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9/31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

**A.**

Full Name (Last, First, Middle Initial) Steven Kazan		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009
Mailing Address 21 Sharon Ave		Transaction ID: C3432559
City Piedmont	State CA	Zip Code 94611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary    General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Robert B Klausner		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2009
Mailing Address 2100 Pacific Ave		Transaction ID: C3432539
City San Francisco	State CA	Zip Code 94115-1546
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Businessman	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary    General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Matthew KOPACKI		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2009
Mailing Address 191 Rock Rd		Transaction ID: C3433798
City Glen Rock	State NJ	Zip Code 07452
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary    General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	2000.00
TOTAL This Period (last page this line number only) .....	▶	

29020143340

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b>	Full Name (Last, First, Middle Initial) Matthew KOPACKI		Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2009		
	Mailing Address 191 Rock Rd		Transaction ID: C3432587		
	City Glen Rock	State NJ	Zip Code 07452	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2012 X Primary General Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Koza		Date of Receipt M M / D D / Y Y Y Y 02 / 17 / 2009		
	Mailing Address box k		Transaction ID: C3433796		
	City Los Altos	State CA	Zip Code 94023	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2012 X Primary General Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) David Liebman		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009		
	Mailing Address 12 Swanhill Dr		Transaction ID: C3432553		
	City Baltimore1	State MD	Zip Code 21208	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2012 X Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	3050.00
TOTAL This Period (last page this line number only) .....	▶	

29020143341

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 31
	(check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) George Malmberg	Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2009
	Mailing Address 31 Stone Tower Ln	Transaction ID: C3432563
	City State Zip Code Wilmington DE 19803	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) Sara Nichols	Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009
	Mailing Address 1824 Old Ranch Rd	Transaction ID: C3432549
	City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) David Nicoletti	Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2009
	Mailing Address 4003 N. Lindstrom PI	Transaction ID: C3433800
	City State Zip Code Tucson AZ 85701	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00		

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

29020143342

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

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

FOR LINE NUMBER: PAGE 12 / 31  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)  
David Nicoletti

Mailing Address 4003 N. Lindstrom Pl

City State Zip Code  
Tucson AZ 85701

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 27 / 2009

Transaction ID: C3432580

Amount of Each Receipt this Period  
500.00

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

B.

Full Name (Last, First, Middle Initial)  
Max Palevsky

Mailing Address 924 Westwood Blvd. #700

City State Zip Code  
Los Angeles CA 90024-2928

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation private investor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 09 / 2009

Transaction ID: C3432557

Amount of Each Receipt this Period  
2400.00

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

C.

Full Name (Last, First, Middle Initial)  
Kim Pimley

Mailing Address 925 Bridle Ln

City State Zip Code  
West Chester PA 19382

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 09 / 2009

Transaction ID: C3432550

Amount of Each Receipt this Period  
250.00

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

SUBTOTAL of Receipts This Page (optional) ..... ► 3150.00

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

29020143343

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one)	PAGE 13 / 31
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Stanley K. Sheinbaum		Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2009
Mailing Address 345 N Rockingham Ave		Transaction ID: C3432564
City Los Angeles	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Economist/Publisher	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Stephen Silberstein		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009
Mailing Address 29 Eucalyptus Rd		Transaction ID: C3432560
City Belvedere	State CA	Zip Code 94920
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Nancy Stephens		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009
Mailing Address 255 North Saltair Ave.		Transaction ID: C3432547
City Los Angeles	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation actress	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	3000.00
TOTAL This Period (last page this line number only) .....	▶	

29020143344

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 31	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Safran & Associates		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9
	Mailing Address 11812 San Vicente Blvd. #600		Transaction ID: C3432573
	City Los Angeles	State CA	Zip Code 90049
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) John Voliva		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9
	Mailing Address 10130 N Green River Rd		Transaction ID: C3433804
	City Evansville	State IN	Zip Code 47725
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) John Voliva		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9
	Mailing Address 10130 N Green River Rd		Transaction ID: C3432584
	City Evansville	State IN	Zip Code 47725
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

29020143345

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 31
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) Jamie Rosenthal Wolf	Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009
	Mailing Address 812 N Foothill Road	Transaction ID: C3432548
	City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Occupation Writer/Journalist	
	Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00
B.	Full Name (Last, First, Middle Initial) Peg Yorkin	Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2009
	Mailing Address 433 S. Beverly	Transaction ID: C3432556
	City State Zip Code Beverly Hills CA 90212	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Fund for a Feminist Majority Occupation Executive Director	
	Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) .....	▶	1300.00
TOTAL This Period (last page this line number only) .....	▶	22760.58

29020143346

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

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

FOR LINE NUMBER: PAGE 16 / 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

**A.**

Full Name (Last, First, Middle Initial) American Pharmacists Association		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 9
Mailing Address 1100 15th Street NW Suite 400		Transaction ID: C3432568
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00193854		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Intl Academy of Compounding Pharmacists		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9
Mailing Address 4638 Riverstone Blvd		Transaction ID: C3432576
City Missouri City	State TX	Zip Code 77459
FEC ID number of contributing federal political committee. <b>C</b> C00424143		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

**C.**

Full Name (Last, First, Middle Initial) NCPA PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9
Mailing Address 100 Daingerfield Road		Transaction ID: C3432575
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <b>C</b> C00030809		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	7000.00
TOTAL This Period (last page this line number only) .....	▶	

29020143347

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

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

FOR LINE NUMBER: PAGE 17 / 31  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
 Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial) Realtors Political Action Committee		Date of Receipt M M / D D / Y . Y Y Y 03 / 05 / 2009
Mailing Address 430 N. Michigan Ave.		Transaction ID: C3432565
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	1000.00
TOTAL This Period (last page this line number only) .....	▶	8000.00

29020143348

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 31	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial) American List Counsel, Inc.			Date of Receipt	
Mailing Address 4300 Highway 1 CN - 5219			M M / D D / Y Y Y Y 01 / 15 / 2009	
City Princeton	State NJ	Zip Code 08543	Transaction ID: C3432570	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 945.78	
Name of Employer		Occupation		
Receipt For: 2012 X Primary General Other (specify) ▼		Election Cycle-to-Date ▼ 22115.90		
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				

SUBTOTAL of Receipts This Page (optional) .....	▶	945.78
TOTAL This Period (last page this line number only) .....	▶	945.78

29020143349

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 19 / 31
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) Chittenden Bank		Transaction ID: D249486		
	Mailing Address 2 Bank Street		Date of Disbursement 01 / 31 / 2009		
	City Burlington State VT Zip Code 05401		Amount of Each Disbursement this Period 195.39		
	Purpose of Disbursement Credit card charges Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Senate President State: District:		Disbursement For: 2012 X Primary General Other (specify) ▼		Category/ Type	
B.	Full Name (Last, First, Middle Initial) Chittenden Bank		Transaction ID: D249495		
	Mailing Address 2 Bank Street		Date of Disbursement 02 / 27 / 2009		
	City Burlington State VT Zip Code 05401		Amount of Each Disbursement this Period 120.39		
	Purpose of Disbursement Credit card charges Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Senate President State: District:		Disbursement For: 2012 X Primary General Other (specify) ▼		Category/ Type	
C.	Full Name (Last, First, Middle Initial) Chittenden Bank		Transaction ID: D249503		
	Mailing Address 2 Bank Street		Date of Disbursement 03 / 31 / 2009		
	City Burlington State VT Zip Code 05401		Amount of Each Disbursement this Period 120.39		
	Purpose of Disbursement Credit card charges Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Senate President State: District:		Disbursement For: 2012 X Primary General Other (specify) ▼		Category/ Type	

SUBTOTAL of Disbursements This Page (optional) .....	▶	436.17
TOTAL This Period (last page this line number only) .....	▶	

29020143350

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 31	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

**A.**

Full Name (Last, First, Middle Initial) Democratic Conference Luncheon Fund		Transaction ID: D249491	
Mailing Address Capital Hill		Date of Disbursement 02 / 05 / 2009	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Business meals	Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/ Type			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

**B.**

Full Name (Last, First, Middle Initial) FEDEX		Transaction ID: D249490	
Mailing Address 3875 Airways Blvd		Date of Disbursement 02 / 05 / 2009	
City Memphis	State TN	Zip Code 38116-5070	Amount of Each Disbursement this Period 42.16
Purpose of Disbursement Messenger-FedEx	Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/ Type			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

**C.**

Full Name (Last, First, Middle Initial) FEDEX		Transaction ID: D249502	
Mailing Address 3875 Airways Blvd		Date of Disbursement 03 / 27 / 2009	
City Memphis	State TN	Zip Code 38116-5070	Amount of Each Disbursement this Period 17.50
Purpose of Disbursement Messenger-FedEx	Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/ Type			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	▶	559.66
TOTAL This Period (last page this line number only) .....	▶	

29020143351

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: D249480
	Mailing Address PO Box 05501	Date of Disbursement 01 / 15 / 2009
	City Andover State MA Zip Code 05501	Amount of Each Disbursement this Period
	Purpose of Disbursement 941 deposits	25.25
	Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	
	Disbursement For: 2012 X Primary General Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: D249481
	Mailing Address PO Box 05501	Date of Disbursement 01 / 15 / 2009
	City Andover State MA Zip Code 05501	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Unemployment	5.32
	Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	
	Disbursement For: 2012 X Primary General Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Lake Champlain Reg Chamber of Commerce	Transaction ID: D249462
	Mailing Address 60 Main St	Date of Disbursement 01 / 09 / 2009
	City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period
	Purpose of Disbursement Membership Dues	48.00
	Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	
	Disbursement For: 2012 X Primary General Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **78.57**

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

29020143352

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) Montpelier Elks Lodge		Transaction ID: D249493	
	Mailing Address State Street		Date of Disbursement 02 / 05 / 2009	
City Montpelier		State VT	Zip Code 05602	
Purpose of Disbursement Sponsorship		Category/ Type		Amount of Each Disbursement this Period 261.60
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought:	House Senate President	Disbursement For:	2012 X Primary General Other (specify) ▼	
State:	District:			

B.	Full Name (Last, First, Middle Initial) Progressive Capital		Transaction ID: D249501	
	Mailing Address 888 16th St NW Suite 303		Date of Disbursement 03 / 27 / 2009	
City Washington		State DC	Zip Code 20006	
Purpose of Disbursement Consultant Exp. (Fundraising)		Category/ Type		Amount of Each Disbursement this Period 6000.45
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought:	House Senate President	Disbursement For:	2012 X Primary General Other (specify) ▼	
State:	District:			

C.	Full Name (Last, First, Middle Initial) Progressive Capital		Transaction ID: D249459	
	Mailing Address 888 16th St NW Suite 303		Date of Disbursement 01 / 06 / 2009	
City Washington		State DC	Zip Code 20006	
Purpose of Disbursement Consultant Exp. (Fundraising)		Category/ Type		Amount of Each Disbursement this Period 5367.26
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought:	House Senate President	Disbursement For:	2012 X Primary General Other (specify) ▼	
State:	District:			

SUBTOTAL of Disbursements This Page (optional) .....	▶	11629.31
TOTAL This Period (last page this line number only) .....	▶	

29020143353

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 23 / 31
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Ssta		Transaction ID: D249487	
Mailing Address 195 Main St		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2009	
City Colchester	State VT	Zip Code 05446-3614	Amount of Each Disbursement this Period  324.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Events (Field)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) The Bookkeeping Center		Transaction ID: D249483	
Mailing Address 1 Mill St Ste 140		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2009	
City Burlington	State VT	Zip Code 05401-1533	Amount of Each Disbursement this Period  630.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Accounting Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: D249479	
Mailing Address PO Box 17120		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2009	
City Tucson	State AZ	Zip Code 85731-7120	Amount of Each Disbursement this Period  268.97 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Mobile Phone		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	▶	1223.47
TOTAL This Period (last page this line number only) .....	▶	

29020143354

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 31
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D249488 Date of Disbursement 02 / 04 / 2009
	Mailing Address PO Box 17120	Amount of Each Disbursement this Period 273.51 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	City Tucson State AZ Zip Code 85731-7120	
	Purpose of Disbursement Mobile Phone Candidate Name	Category/ Type
	Office Sought: House Senate President State: District:	Disbursement For: 2012 X Primary General Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) VFW	Transaction ID: D249499 Date of Disbursement 03 / 06 / 2009
	Mailing Address Pleasant St	Amount of Each Disbursement this Period 125.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	City Morrisville State VT Zip Code 05661	
	Purpose of Disbursement Print Buys Candidate Name	Category/ Type
	Office Sought: House Senate President State: District:	Disbursement For: 2012 X Primary General Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) VT Dept of Labor	Transaction ID: D249482 Date of Disbursement 01 / 15 / 2009
	Mailing Address 5 Green Mountain Drive PO Box 488	Amount of Each Disbursement this Period 9.41 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	City Montpelier State VT Zip Code 05601-0488	
	Purpose of Disbursement State Unemployment Candidate Name	Category/ Type
	Office Sought: House Senate President State: District:	Disbursement For: 2012 X Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	▶	407.92
TOTAL This Period (last page this line number only) .....	▶	

29020143355

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 25 / 31
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial) Woodstock Farmers Market	Transaction ID: D249492 Date of Disbursement 02 / 05 / 2009
	Mailing Address Main Street	
	City Woodstock State VT Zip Code 05091	Amount of Each Disbursement this Period 598.50
	Purpose of Disbursement Catering	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: House Senate President Disbursement For: 2012 X Primary General Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) Credit Card Services	Transaction ID: D249456 Date of Disbursement 01 / 05 / 2009
	Mailing Address PO Box 405	
	City Burlington State VT Zip Code 05402-0405	Amount of Each Disbursement this Period 975.41
	Purpose of Disbursement Credit Card Services	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: House Senate President Disbursement For: 2012 X Primary General Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) US Air	Transaction ID: D249458 Date of Disbursement 01 / 05 / 2009
	Mailing Address Airport	
	City Wash State DC Zip Code 20001	Amount of Each Disbursement this Period 975.41
	Purpose of Disbursement Cand. Travel	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: House Senate President Disbursement For: 2012 X Primary General Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	▶	1573.91
TOTAL This Period (last page this line number only) .....	▶	

29020143356

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 31

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

**A.**

Full Name (Last, First, Middle Initial)  
Business Credit Card Services

Transaction ID: D249478  
Date of Disbursement  
M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 0 9

Mailing Address PO Box 1044

City Brattleboro State VT Zip Code 05302-1044

Purpose of Disbursement  
Credit Card Services

Candidate Name

Category/  
Type

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

State: District:

Amount of Each Disbursement this Period  
4539.90  
Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Active Host

Transaction ID: D249472  
Date of Disbursement  
M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 0 9

Mailing Address 22 N College St.

City Schenectady State NY Zip Code 12305

Purpose of Disbursement  
Internet Access

Candidate Name

Category/  
Type

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

State: District:

Amount of Each Disbursement this Period  
169.95  
Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53  
**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Best Western

Transaction ID: D249477  
Date of Disbursement  
M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 0 9

Mailing Address Williston Road

City South Burlington State VT Zip Code 05403

Purpose of Disbursement  
Events (Field)

Candidate Name

Category/  
Type

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

State: District:

Amount of Each Disbursement this Period  
1298.89  
Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53  
**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **4539.90**

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

29020143357

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 27 / 31
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Borders Books	Transaction ID: D249469	
	Date of Disbursement 01 / 15 / 2009	
Mailing Address Church St.	Amount of Each Disbursement this Period	
City Burlington State VT Zip Code 05401	24.55	
Purpose of Disbursement Office Exp. (Gen. Camp. Exp.)	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		[MEMO ITEM]
Office Sought: House Senate President	Disbursement For: 2012	
State: District:	X Primary General Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Crystal Rock Bottled Water	Transaction ID: D249476	
	Date of Disbursement 01 / 15 / 2009	
Mailing Address 1050 Buckingham St.	Amount of Each Disbursement this Period	
City Watertown State CT Zip Code 06795	32.79	
Purpose of Disbursement Meals for Volunteers	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		[MEMO ITEM]
Office Sought: House Senate President	Disbursement For: 2012	
State: District:	X Primary General Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Easy Self Storage	Transaction ID: D249475	
	Date of Disbursement 01 / 15 / 2009	
Mailing Address 35 Swift St	Amount of Each Disbursement this Period	
City South Burlington State VT Zip Code 05403-7306	87.00	
Purpose of Disbursement Storage	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		[MEMO ITEM]
Office Sought: House Senate President	Disbursement For: 2012	
State: District:	X Primary General Other (specify) ▼	

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

29020143358

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 28 / 31	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b		
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21		

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Leonardo's Pizza		Transaction ID: D249470	
Mailing Address 83 Pearl St		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2009	
City Burlington	State VT	Zip Code 05401-4333	Amount of Each Disbursement this Period  61.75 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
Purpose of Disbursement Meals		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) NGP		Transaction ID: D249474	
Mailing Address 5505 Connecticut Ave NW		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2009	
City Washington	State DC	Zip Code 20015	Amount of Each Disbursement this Period  900.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
Purpose of Disbursement Contract Expenses		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) Sovernet		Transaction ID: D249471	
Mailing Address 276 E Allen St		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2009	
City Winooski	State VT	Zip Code 05404-1570	Amount of Each Disbursement this Period  127.73 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
Purpose of Disbursement Internet Access		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼		
State: District:			

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

29020143359

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Taverna the Greek

Transaction ID: D249465

Date of Disbursement

01 / 15 / 2009

Mailing Address 1100 Penn Ave, NW

City Wash State DC Zip Code 20004

Amount of Each Disbursement this Period

56.42

Purpose of Disbursement

Meals

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Category/  
Type

[MEMO ITEM]

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

State: District:

B.

Full Name (Last, First, Middle Initial)

US Air

Transaction ID: D249468

Date of Disbursement

01 / 15 / 2009

Mailing Address Airport

City Wash State DC Zip Code 20001

Amount of Each Disbursement this Period

439.50

Purpose of Disbursement

Cand. Travel

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Category/  
Type

[MEMO ITEM]

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: D249473

Date of Disbursement

01 / 15 / 2009

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

1082.53

Purpose of Disbursement

Mobile Phone

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Category/  
Type

[MEMO ITEM]

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 31

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b> Full Name (Last, First, Middle Initial) Business Credit Card Services		Transaction ID: D249496 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9	
Mailing Address PO Box 1044		Amount of Each Disbursement this Period  4035.22 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Brattleboro	State VT	Zip Code 05302-1044	Category/ Type
Purpose of Disbursement Credit Card Services		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	
Candidate Name			
Office Sought: House Senate President	State:    District:		
<b>B.</b> Full Name (Last, First, Middle Initial) Ali's Pizza		Transaction ID: D249498 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9	
Mailing Address 1382 E. Capital St., NE		Amount of Each Disbursement this Period  363.78 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement Meals for Volunteers		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	
Candidate Name			
Office Sought: House Senate President	State:    District:		
<b>C.</b> Full Name (Last, First, Middle Initial) Fogo de Chao		Transaction ID: D249497 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 9	
Mailing Address 1100 Pennsylvania Avenue		Amount of Each Disbursement this Period  3671.65 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement Catering		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	
Candidate Name			
Office Sought: House Senate President	State:    District:		

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4035.22**

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

29020143361

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

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

FOR LINE NUMBER: (check only one)

PAGE 31 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Friends of Bernie Sanders

<b>A.</b> Full Name (Last, First, Middle Initial) Business Credit Card Services		Transaction ID: D249504 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009	
Mailing Address PO Box 1044		Amount of Each Disbursement this Period  40.73 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Brattleboro	State VT	Zip Code 05302-1044	Category/ Type
Purpose of Disbursement Credit Card Services		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2012 X Primary           General Other (specify) ▼		State:           District:
Full Name (Last, First, Middle Initial) Crystal Rock Bottled Water		Transaction ID: D249505 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009	
Mailing Address 1050 Buckingham St.		Amount of Each Disbursement this Period  40.73 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	
City Watertown	State CT	Zip Code 06795	Category/ Type
Purpose of Disbursement Meals for Volunteers		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2012 X Primary           General Other (specify) ▼		State:           District:

SUBTOTAL of Disbursements This Page (optional) .....	▶ 40.73
TOTAL This Period (last page this line number only) .....	▶ 24524.86

29020143362





airbill 8688 9123 0069

Sender's FedEx Account Number 201-345247

Rec'd Smiths Phone 602 862 1505

Special Handling

State VT ZIP 05402

Office of the Governor's Records

Phone

07-084841

FedEx

TO RF

TRK# 8688 9123 0069

MON - 13 APR A2 PRIORITY OVERNIGHT

XC YKNA

20510 DC-US DCA



emp# 2029921 10APR09 07:28

0200

FedEx Retrieval Copy

Press

4a Express Package Service

1  FedEx Priority Overnight 5  FedEx Standard Overnight 5  FedEx First Overnight

3  FedEx 2Day 20  FedEx Express Saver 20  FedEx 2Day Freight 83  FedEx 3Day Freight

4b Express Freight Service

7  FedEx 1Day Freight 8  FedEx 2Day Freight 83  FedEx 3Day Freight

5  Packaging 2  FedEx Pak 30  FedEx Tube

6  Special Handling 31  HOLD Anyday 31  RETURN TO SENDER

3  SATURDAY Delivery 31  Signature Required 31  Signature Required (M-F)

7  Payment Bill to: Sender 2. Recipient 3  Th 1Prng 4 Credit 5

4 Express Shipments Only

RT 0 FL

0069 04.13

93E4T02062

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>04.10.09</u>	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

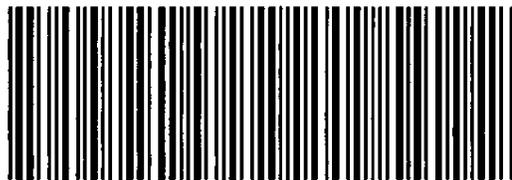
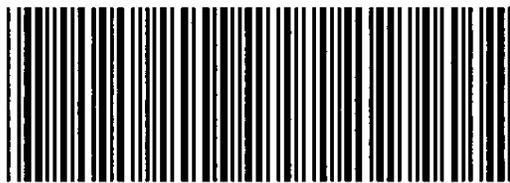
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 04.15.09

29020143365



29020143366