

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 125

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

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.)

April 15 Quarterly Report Monthly Report Due On:
 February 20 June 20 October 20
 July 15 Quarterly Report March 20 July 20 November 20
 October 15 Quarterly Report April 20 August 20 December 20
 January 31 Year End Report May 20 September 20 January 31

Twelfth day report preceding _____
 (Type of Election)
 election on _____ in the State of _____

Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 01/01/2009	THROUGH 03/31/2009
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SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	485547.29
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	0.00
8. SUBTOTAL (Lines 6 and 7)	.....	485547.29
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	302106.95
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	183440.34
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	.....	15440269.88
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)	.....	15445809.88

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 04/15/2009
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

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(PAGE 2, FEC FORM 3P)

Name of committee (in full) Chris Dodd For President Inc		Report Covering the Period From: 01/01/2009 To: 03/31/2009	
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	290606.95	15533496.90	
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	11500.00	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))	11500.00	1383800.30	
29. OTHER DISBURSEMENTS	0.00	11000.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	302106.95	18671218.45	
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 / 125
 (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
Massachussetts	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: B5510DEED9DBB413994C</p> <p>Date of Disbursement 02 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 796.39</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 Process Payroll</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: B1FB16D0BCA98405CA35</p> <p>Date of Disbursement 02 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 71.00</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: BA823CEF3F69E443E915</p> <p>Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 97.75</p>

SUBTOTAL of Disbursements This Page (optional) ▶

965.14

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 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: B4CFFC83FD82E4CCBB20</p> <p>Date of Disbursement 03 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 71.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Air Charter Team, Inc.</p> <p>Mailing Address 10015 N.W. Ambasssador Drive Suite 202</p> <p>City Kansas City State MO Zip Code 64153</p> <p>Purpose of Disbursement repayment of debt</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: BDF6F6E74B0814A45888</p> <p>Date of Disbursement 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1304.61</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Alliant Energy</p> <p>Mailing Address PO Box 3066</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement repayment of debt</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: BD876D052460940E1912</p> <p>Date of Disbursement 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 239.60</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1615.21

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

Schedule B-P ITEMIZED DISBURSEMENTS

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<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) Alliant Energy Mailing Address PO Box 3066 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: B809883B74A734012A1C Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 263.55
B.	Full Name (Last, First, Middle Initial) Alliant Energy Mailing Address PO Box 3066 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: B032859B6EAB744D283C Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 540.80
C.	Full Name (Last, First, Middle Initial) Alliant Energy Mailing Address PO Box 3066 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: BBAC556FDBE26468A8A1 Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 401.72

SUBTOTAL of Disbursements This Page (optional) ▶

1206.07

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

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Alliant Energy Mailing Address PO Box 3066 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: B61A3BDF7BAD247BBB88 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 50.75
B.	Full Name (Last, First, Middle Initial) Alliant Energy Mailing Address PO Box 3066 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: BE8A915782CF3435EAFA Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 852.59
C.	Full Name (Last, First, Middle Initial) Alliant Energy Mailing Address PO Box 3066 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: B945128A8CCE041138E4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 254.12

SUBTOTAL of Disbursements This Page (optional) ▶

1157.46

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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) Allied Telecom</p> <p>Mailing Address PO BOx 758792</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement repayment of debt</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: B37D245D222874857A77</p> <p>Date of Disbursement MM / DD / YYYY 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 850.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address Washington Union Station 60 Massachusetts Ave</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Transportation</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: B5268B124AA9443C6865</p> <p>Date of Disbursement MM / DD / YYYY 01 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 98.00</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield</p> <p>Mailing Address 370 Bassett Road</p> <p>City North Haven State CT Zip Code 06473-4201</p> <p>Purpose of Disbursement Insurance</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: BC57797FEA0B04E05BF7</p> <p>Date of Disbursement MM / DD / YYYY 02 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1119.97</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1969.97

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

Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<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 State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B25B67640F69D4871921 Date of Disbursement 03 / 17 / 2009 Amount of Each Disbursement this Period 6000.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Aristotle Publishing Mailing Address 205 Pennsylvania Ave City Washington State DC Zip Code 20003 Purpose of Disbursement Generation of report writer 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: B0FE713734D6E4B4CBE8 Date of Disbursement 03 / 19 / 2009 Amount of Each Disbursement this Period 800.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60572 Purpose of Disbursement depayment of debt 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: B251399BB76BE46F1843 Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 304.30 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

7104.30

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

Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<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) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60572 Purpose of Disbursement repayment of debt 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: BFB4E2D286D95434BB99 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 111.80
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60572 Purpose of Disbursement repayment of debt 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: B4796D583E5864AA0817 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 1861.62
C.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 830175 Acct Analysis City Dallas State TX Zip Code 75283-0175 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: B32A4C2EA448C48A8A4E Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 9 Amount of Each Disbursement this Period 248.04

SUBTOTAL of Disbursements This Page (optional) ▶

2221.46

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)

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<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. Full Name (Last, First, Middle Initial) Big Ten Rentals, Inc.</p> <p>Mailing Address 1820 Boyrum St</p> <p>City Iowa City State IA Zip Code 52240-4555</p> <p>Purpose of Disbursement Equipment Rental</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: BAAF38429FB3341F29A7</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 93.28</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Bi-State Cartridge Service, Inc.</p> <p>Mailing Address 1325 15th Street</p> <p>City Moline State IL Zip Code 61265</p> <p>Purpose of Disbursement repayment of debt</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: B389864F0230646C7B35</p> <p>Date of Disbursement 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 130.54</p>
<p>C. Full Name (Last, First, Middle Initial) Calling Cards</p> <p>Mailing Address 11757 Katy Frwy, Ste. 390</p> <p>City Houston State TX Zip Code 77079</p> <p>Purpose of Disbursement Conference Calls</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: B83A150C2B66B413BAA5</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 120.00</p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>130.54</p>
<p>TOTAL This Period (last page this line number only)</p>	

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) Calling Cards Mailing Address 11757 Katy Frwy, Ste. 390 City Houston State TX Zip Code 77079 Purpose of Disbursement Conference Calls 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: BE3F17AC7C6764160BA5 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 40.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Carter Printing Mailing Address 1739 East Grand Avenue City Des Moines State IA Zip Code 50316 Purpose of Disbursement repayment of debt 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: B3F3280CAADBB489081A Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 7562.83

C. Full Name (Last, First, Middle Initial) Carter Printing Mailing Address 1739 East Grand Avenue City Des Moines State IA Zip Code 50316 Purpose of Disbursement repayment of debt 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: B047F7350CCCE4C2A99C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 110.59

SUBTOTAL of Disbursements This Page (optional) ▶	7673.42
TOTAL This Period (last page this line number only) ▶	[]

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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) Carter Printing Mailing Address 1739 East Grand Avenue City Des Moines State IA Zip Code 50316 Purpose of Disbursement repayment of debt 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: B0502CC91504E48F59AE Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 111.89
B.	Full Name (Last, First, Middle Initial) Cedar Rapids Municipal Utilities Mailing Address PO Box 3255 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: B56365BCEC24743EA93B Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 57.90
C.	Full Name (Last, First, Middle Initial) Cedar Rapids Municipal Utilities Mailing Address PO Box 3255 City Cedar Rapids State IA Zip Code 52406 Purpose of Disbursement repayment of debt 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: B58D7ABE4B49A40D1822 Date of Disbursement 02 / 13 / 2009 Amount of Each Disbursement this Period 165.81

SUBTOTAL of Disbursements This Page (optional) ▶

335.60

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) Charles George Trucking Co., Inc.</p> <p>Mailing Address PO Box 857</p> <p>City Londonberry State NH Zip Code 03053</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>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:</p>	<p>Transaction ID: B9109CC30B7DC400AB1C Date of Disbursement: 01 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 535.52</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Comcast</p> <p>Mailing Address 508-D S Van Dorn Street</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Cable Service</p> <p>Candidate Name</p> <p>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:</p>	<p>Transaction ID: B49853ACE816A407EAA9 Date of Disbursement: 02 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 171.70</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Country Inn Hotel</p> <p>Mailing Address 1202 Highway 9 West</p> <p>City Decorah State IA Zip Code 52101-2459</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>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:</p>	<p>Transaction ID: BE3D93B91C7FF4F9CBF0 Date of Disbursement: 01 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 862.34</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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: B51D891B4D3614ED1BF0 Date of Disbursement 01 / 01 / 2009 Amount of Each Disbursement this Period 302.42
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: BE71A992DC6404488A2E Date of Disbursement 01 / 15 / 2009 Amount of Each Disbursement this Period 302.42
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: B3B4CCC1946ED4AB7AEC Date of Disbursement 02 / 01 / 2009 Amount of Each Disbursement this Period 302.42

SUBTOTAL of Disbursements This Page (optional) ▶

907.26

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 <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <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: BFB226445CFE0499DAE2 Date of Disbursement 02 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 302.42
B.	Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <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: BC3A85EC83C034C5B917 Date of Disbursement 03 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 126.94
C.	Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <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: B2CDBB266B65F4741B0F Date of Disbursement 03 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 126.94

SUBTOTAL of Disbursements This Page (optional) ▶

556.30

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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 <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <hr/> Purpose of Disbursement Increase of tax rate 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: B4045933A38214AE1A95 Date of Disbursement 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 198.35
B.	Full Name (Last, First, Middle Initial) DC Dept Taxation <hr/> Mailing Address P.O. Box 470 <hr/> City Washington State DC Zip Code 20044 <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: BFD765C40DEC34AB2AE1 Date of Disbursement 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 4480.01
C.	Full Name (Last, First, Middle Initial) Deaf Services Unlimited <hr/> Mailing Address Suite 170 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement repayment of debt 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: B204511F58E534BDC88F Date of Disbursement 02 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 130.00

SUBTOTAL of Disbursements This Page (optional) ▶

4808.36

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)

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<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) Des Moines Water Works</p> <p>Mailing Address 2201 George Flagg Parkway</p> <p>City Des Moines State IA Zip Code 50321-1190</p> <p>Purpose of Disbursement repayment of debt</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: BFFBAED9C853D4A7881A</p> <p>Date of Disbursement MM / DD / YYYY 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 117.91</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Discover</p> <p>Mailing Address P.O. Box 3016</p> <p>City New Albany State OH Zip Code 43054</p> <p>Purpose of Disbursement 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: BE5048F8AA5A64C65BCC</p> <p>Date of Disbursement MM / DD / YYYY 01 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 10.59</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Drink More Water</p> <p>Mailing Address Montgomery County Airpark 7595-A Rickenbacker Drive</p> <p>City Gaithersburg State MD Zip Code 20879</p> <p>Purpose of Disbursement Water Delivery</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: BADC72369DB6F4DD8BD1</p> <p>Date of Disbursement MM / DD / YYYY 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 15.50</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

128.50

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A. Full Name (Last, First, Middle Initial) Drink More Water</p> <p>Mailing Address Montgomery County Airpark 7595-A Rickenbacker Drive</p> <p>City Gaithersburg State MD Zip Code 20879</p> <p>Purpose of Disbursement Water Delivery</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: BAE32EE3651BC45AF81B</p> <p>Date of Disbursement MM / DD / YYYY 02 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 23.96</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Enterprise Rent-a-Car</p> <p>Mailing Address 524 14th Street</p> <p>City Des Moines State IA Zip Code 50309-3104</p> <p>Purpose of Disbursement Transportation</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: B2124C8B47AAD4CAC8FA</p> <p>Date of Disbursement MM / DD / YYYY 01 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 3087.35</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Extra Space Storage</p> <p>Mailing Address 132 Silas Deane Highway</p> <p>City Wethersfield State CT Zip Code 06109</p> <p>Purpose of Disbursement Storage</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: B383DB3B03B9C490E827</p> <p>Date of Disbursement MM / DD / YYYY 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 89.04</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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

A.	Full Name (Last, First, Middle Initial) Extra Space Storage <hr/> Mailing Address 132 Silas Deane Highway <hr/> City Wethersfield State CT Zip Code 06109 <hr/> Purpose of Disbursement Storage 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: BE672813AE662472ABE1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.70 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) ExxonMobil <hr/> Mailing Address P.O. Box 688938 <hr/> City Des Moines State IA Zip Code 50368-8938 <hr/> Purpose of Disbursement repayment of debt 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: B21E321929DC947238B5 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 429.36
C.	Full Name (Last, First, Middle Initial) ExxonMobil <hr/> Mailing Address P.O. Box 688938 <hr/> City Des Moines State IA Zip Code 50368-8938 <hr/> Purpose of Disbursement repayment of debt 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: BC606870D890C416C95E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 241.86

SUBTOTAL of Disbursements This Page (optional) ▶

671.22

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) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B8D09FE162BF64892ACF Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 8 Amount of Each Disbursement this Period 72.66 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B7A57885528254583A82 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 8 Amount of Each Disbursement this Period 21.15 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B17E2C5A14EAD446F951 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 20.92 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

<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) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B96D9D5BFBE124BBFA3D Date of Disbursement 01 / 27 / 2008 Amount of Each Disbursement this Period 20.92 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B6ECF38AD044640398F2 Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 25.21 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: BBE9068E76DF84D9890C Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 29.74 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: BDDE547E8566347F7971 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 22.08 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B6B1CDAC9100D4B1385B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 32.59 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P.O. Box 371461 City Pittsburgh State PA Zip Code 15250-7461 Purpose of Disbursement Courier Services 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: B93E7EC5630804746B2B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8 Amount of Each Disbursement this Period 27.29 [MEMO ITEM]

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

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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) FedEx</p> <p>Mailing Address P.O. Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250-7461</p> <p>Purpose of Disbursement Courier Services</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: BCCACDA57EFC4D57979</p> <p>Date of Disbursement MM / DD / YYYY 02 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 33.62</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Free Media, Inc.</p> <p>Mailing Address 777 West End Avenue #5C</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement repayment of debt</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: B5BB09F0640F24BE3AD6</p> <p>Date of Disbursement MM / DD / YYYY 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 635.01</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Frontline Productions</p> <p>Mailing Address 125 Hemlock Drive</p> <p>City Deep River State CT Zip Code 06417</p> <p>Purpose of Disbursement repayment of debt</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: BCD69B595E04B4325AFA</p> <p>Date of Disbursement MM / DD / YYYY 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 885.00</p>

SUBTOTAL of Disbursements This Page (optional)

1520.01

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) Furniture Options Mailing Address 8191 Birchwood Court, Ste. A City Johnston State IA Zip Code 50131-2931 Purpose of Disbursement Equipment Rental 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: B6BC0839CDF114C9A8E1 Date of Disbursement 01 / 08 / 2008 Amount of Each Disbursement this Period 404.79 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Google.com Mailing Address 1600 Amphitheatre Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement Advertising 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: BB4E5B06DBAF14516B5F Date of Disbursement 01 / 27 / 2008 Amount of Each Disbursement this Period 5.00 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Hampton Inn Mailing Address 3583 ST. Mathews Road City Orangeburg State SC Zip Code 29118 Purpose of Disbursement Lodging 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: B854D079054864BA098B Date of Disbursement 01 / 05 / 2008 Amount of Each Disbursement this Period 120.99 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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) Heartland Flagpoles and Flags Mailing Address 3719 SW 9th Street City Des Moines State IA Zip Code 50315 Purpose of Disbursement repayment of debt 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: BDE3B2220016F46AF886 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 215.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Hertz Mailing Address 333 W. Harbor Drive City San Diego State CA Zip Code 92101 Purpose of Disbursement Transportation 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: B8995E42888A84E98956 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 3956.42 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Hertz Mailing Address 333 W. Harbor Drive City San Diego State CA Zip Code 92101 Purpose of Disbursement Transportation 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: B0F26C17CC1824D779B8 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 802.72 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	215.00
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) Hertz	Transaction ID: BDFAC2C18FF02245E18AE
	Mailing Address 333 W. Harbor Drive	Date of Disbursement MM / DD / YYYY 01 / 24 / 2008
	City San Diego State CA Zip Code 92101	Amount of Each Disbursement this Period 245.92
	Purpose of Disbursement Transportation Candidate Name	[MEMO ITEM]
	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:	

B.	Full Name (Last, First, Middle Initial) Hertz	Transaction ID: B0B1FBA3781B94C9081F
	Mailing Address 333 W. Harbor Drive	Date of Disbursement MM / DD / YYYY 02 / 10 / 2008
	City San Diego State CA Zip Code 92101	Amount of Each Disbursement this Period 997.79
	Purpose of Disbursement Transportation Candidate Name	[MEMO ITEM]
	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:	

C.	Full Name (Last, First, Middle Initial) Hinckley Springs	Transaction ID: BCFA892D8BF6F4D86863
	Mailing Address P.O. Box 660579	Date of Disbursement MM / DD / YYYY 02 / 17 / 2009
	City Dallas State TX Zip Code 75266-0579	Amount of Each Disbursement this Period 306.68
	Purpose of Disbursement repayment of debt 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:	

SUBTOTAL of Disbursements This Page (optional)	306.68
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
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<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) Home Depot	Transaction ID: B883E0216CD6E4765ADD Date of Disbursement 12 / 30 / 2007
	Mailing Address 2455 Falls Ferry Road	Amount of Each Disbursement this Period -232.03
	City Atlanta State GA Zip Code 30339	
	Purpose of Disbursement Supplies	
	Candidate Name	Category/Type
	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:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Hotel Vetro	Transaction ID: B55AB57EE36A54C94B1E Date of Disbursement 01 / 04 / 2008
	Mailing Address 201 South Linn Street	Amount of Each Disbursement this Period 31.46
	City Iowa City State IA Zip Code 52240	
	Purpose of Disbursement Lodging	
	Candidate Name	Category/Type
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Hotel Vetro	Transaction ID: BDC5CFEF2958E4655808 Date of Disbursement 01 / 08 / 2008
	Mailing Address 201 South Linn Street	Amount of Each Disbursement this Period 203.52
	City Iowa City State IA Zip Code 52240	
	Purpose of Disbursement Lodging	
	Candidate Name	Category/Type
	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:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
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

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<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) Hotwire Mailing Address 333 Market Street Suite 100 City San Francisco State CA Zip Code 94105 Purpose of Disbursement Lodging 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: B331139E6E85A46318D0 Date of Disbursement 01 / 31 / 2008 Amount of Each Disbursement this Period 159.43 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Iowa Bakery Cafe Mailing Address 4040 University Avenue A City Des Moines State IA Zip Code 50311-3559 Purpose of Disbursement Food & Beverage 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: B2D108A5CF2E14EFDA12 Date of Disbursement 01 / 03 / 2008 Amount of Each Disbursement this Period 29.53 [MEMO ITEM]
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: B43129067DA994257A8C Date of Disbursement 01 / 01 / 2009 Amount of Each Disbursement this Period 950.50

SUBTOTAL of Disbursements This Page (optional) ▶	950.50
TOTAL This Period (last page this line number only) ▶	[]

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<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: BB34211D70458441EB03 Date of Disbursement 01 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 950.03
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: B39CA30E51A914A8B9B5 Date of Disbursement 02 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 940.05
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: B8FEED7A0CB174B0D935 Date of Disbursement 02 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 928.03

SUBTOTAL of Disbursements This Page (optional) ▶

2818.11

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) IRS	Transaction ID: BA5F0BDC9451048AD87E
	Mailing Address P.O. Box 8530	Date of Disbursement MM / DD / YYYY 03 / 01 / 2009
	City Philadelphia State PA Zip Code 19162	Amount of Each Disbursement this Period 383.92
	Purpose of Disbursement Taxes Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: B31D2BA970FA74C258E0
	Mailing Address P.O. Box 8530	Date of Disbursement MM / DD / YYYY 03 / 15 / 2009
	City Philadelphia State PA Zip Code 19162	Amount of Each Disbursement this Period 365.05
	Purpose of Disbursement Taxes Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Koch Brothers	Transaction ID: B3936ED1535924D4580D
	Mailing Address 325 Grand Avenue P.O. Box 1755	Date of Disbursement MM / DD / YYYY 02 / 17 / 2009
	City Des Moines State IA Zip Code 50306	Amount of Each Disbursement this Period 211.99
	Purpose of Disbursement repayment of debt Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	960.96
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) Koch Brothers	Transaction ID: BCEAC4FE326FF4025AEE Date of Disbursement MM / DD / YYYY 02 / 17 / 2009
	Mailing Address 325 Grand Avenue P.O. Box 1755	Amount of Each Disbursement this Period 126.82
	City Des Moines State IA Zip Code 50306	
	Purpose of Disbursement repayment of debt Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) La Quinta Inn & Suites	Transaction ID: B669A57304E6F443EB6E Date of Disbursement MM / DD / YYYY 01 / 05 / 2008
	Mailing Address 909 Hidden Ridge, Suite 600	Amount of Each Disbursement this Period 1881.60
	City Irving State TX Zip Code 75038	
	Purpose of Disbursement Lodging Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) La Quinta Inn & Suites	Transaction ID: B995D3CBC64BA4C9F83D Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
	Mailing Address 909 Hidden Ridge, Suite 600	Amount of Each Disbursement this Period 84.00
	City Irving State TX Zip Code 75038	
	Purpose of Disbursement Lodging Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	126.82
TOTAL This Period (last page this line number only)	▶	

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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) Lexis Nexis</p> <p>Mailing Address P.O. Box 933</p> <p>City Dayton State OH Zip Code 45401</p> <p>Purpose of Disbursement Research Software</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: B129F8D44AB9E42F98FF</p> <p>Date of Disbursement 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 475.88</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mason City Public Utilities</p> <p>Mailing Address 10 First Street Northwest</p> <p>City Mason City State IA Zip Code 50401-3224</p> <p>Purpose of Disbursement repayment of debt</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: B2B1A8E77381843D481F</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 123.36</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Metropolitan Club</p> <p>Mailing Address One East 60th Street</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement repayment of debt</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: BA0A09893862348D0BDB</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 21459.11</p>

SUBTOTAL of Disbursements This Page (optional) ▶

21582.47

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) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: B04C477CEBF68483D8B1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1406.57
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: B5E1421E2B080474A87E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 65.24
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BDDC438C0B72641F7B85 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 416.01
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1887.82

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: B5411101D738A4F079B6 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 196.90
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BEDB67C053C374887B50 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 123.36
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BC023DE5035764AA3BFD Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 659.58
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

979.84

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) MidAmerican Energy Mailing Address P.O. Box 8020 City Davenport State IA Zip Code 52808-8020 Purpose of Disbursement repayment of debt 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: BEEBB1F8B909F460785C Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 72.04
B.	Full Name (Last, First, Middle Initial) MidAmerican Energy Mailing Address P.O. Box 8020 City Davenport State IA Zip Code 52808-8020 Purpose of Disbursement repayment of debt 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: B7BC11ECB834E41B9B29 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 1115.75
C.	Full Name (Last, First, Middle Initial) NexGen Mailing Address 10500 Hickman Road Ste J City Clive State IA Zip Code 50325-3706 Purpose of Disbursement repayment of debt 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: BF2B253D4470D4F1CB18 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 224.86

SUBTOTAL of Disbursements This Page (optional) ▶

1412.65

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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) Northern Business Machines</p> <p>Mailing Address 24 Terry Avenue</p> <p>City Burlington State MA Zip Code 01803</p> <p>Purpose of Disbursement repayment of debt</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: BC27D1BE3CB1C4F92817</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 698.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Northland Trumbull, LLC</p> <p>Mailing Address C/o Northland Investment Corporati P.O. Box 845604</p> <p>City Boston State MA Zip Code 02284</p> <p>Purpose of Disbursement repayment of debt</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: BC50B2186FE904BD8AB3</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 3850.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Northland Trumbull, LLC</p> <p>Mailing Address C/o Northland Investment Corporati P.O. Box 845604</p> <p>City Boston State MA Zip Code 02284</p> <p>Purpose of Disbursement repayment of debt</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: B093D04DD3BF34836A6E</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 3850.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>8398.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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) Northland Trumbull, LLC Mailing Address C/o Northland Investment Corporati P.O. Box 845604 City Boston State MA Zip Code 02284 Purpose of Disbursement repayment of debt 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: B5E6583D84CAF43F9908 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 3850.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) pair Networks, Inc. Mailing Address 2403 Sidney St. Suite 210 City Pittsburgh State PA Zip Code 15203 Purpose of Disbursement Computer/Data 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: B9BBF14EBA7A04CF8990 Date of Disbursement 02 / 05 / 2008 Amount of Each Disbursement this Period 398.94 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Pentimento Design LLC Mailing Address 1133 Mapleton Avenue City Suffield State CT Zip Code 06078 Purpose of Disbursement repayment of debt 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: B61253F895644498AA75 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 212.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

4062.00

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) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: B158B24714A14496EBA9 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 25233.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: BD8CCB6326645492F9C7 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 10000.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: B0F2F6E3B4B124277BDC Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 10017.02 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

45250.02

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

A.	Full Name (Last, First, Middle Initial) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: B1E64D8AFCF054DB0BFC Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 25134.72
B.	Full Name (Last, First, Middle Initial) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: B77FC14A82F454495969 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 10009.00
C.	Full Name (Last, First, Middle Initial) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: B3D22B275B3754CD4AFF Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 20016.20

SUBTOTAL of Disbursements This Page (optional) ▶

55159.92

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) Perkins Coie Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement repayment of debt 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: B76E309B9469746DDA6D Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 25037.09
B.	Full Name (Last, First, Middle Initial) Pitney Bowes Mailing Address PO Box 856390 City Louisville State KY Zip Code 40285 Purpose of Disbursement repayment of debt 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: B4D3039AFD6224AEBBA0 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 5522.57
C.	Full Name (Last, First, Middle Initial) Pitney Bowes Inc. PAC Mailing Address Pitney Bowes World Headquarters 1 Elmcroft Road City Stamford State CT Zip Code 06926-0001 Purpose of Disbursement re-issue of check 10637 Candidate Name Pitney Bowes Inc. PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF10D8DB5D818426180A Date of Disbursement 03 / 19 / 2009 Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

35559.66

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)

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<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) PMI Mailing Address Parking Management, Inc. 1725 DeSales Street NW City Washington State DC Zip Code 20036-4406 Purpose of Disbursement repayment of debt 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: B059AD2581AEE4DF5914 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 465.00
B.	Full Name (Last, First, Middle Initial) Pratt AV Mailing Address 333 SW 9th Street, Ste N City Des Moines State IA Zip Code 50309-4440 Purpose of Disbursement AV Equipment 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: BCFAB80C93F8F4744832 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 2482.45 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Pratt AV Mailing Address 333 SW 9th Street, Ste N City Des Moines State IA Zip Code 50309-4440 Purpose of Disbursement AV Equipment 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: B1C27CB5F927C4D1BB73 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 96.62 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

465.00

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)

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<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) Public Service of New Hampshire Mailing Address P.O. Box 360 City Manchester State NH Zip Code 03105-0360 Purpose of Disbursement repayment of debt 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: B465B72A9F3CC4ED382D Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 993.78 Category/Type
B.	Full Name (Last, First, Middle Initial) Public Service of New Hampshire Mailing Address P.O. Box 360 City Manchester State NH Zip Code 03105-0360 Purpose of Disbursement repayment of debt 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: BE4D68898AE384CAFBB7 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 131.82 Category/Type
C.	Full Name (Last, First, Middle Initial) Residence Inn by Marriott Mailing Address 10400 Fernwood Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement Lodging 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: B36EDB348CA754CCA892 Date of Disbursement 01 / 05 / 2008 Amount of Each Disbursement this Period 373.30 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1125.60

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)

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<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) Ristorante Luigino</p> <p>Mailing Address 1100 New York Ave., NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Food & Beverage</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: B26C9915987804E479BD</p> <p>Date of Disbursement 01 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 59.40</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Simard Printing</p> <p>Mailing Address 300 Salem Street</p> <p>City Woburn State MA Zip Code 01801-2055</p> <p>Purpose of Disbursement repayment of debt</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: B9B4D491BD6DB4ECBB0B</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 433.13</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36657</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Airfare</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: B8C429C3ACD844E028E8</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 257.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	433.13
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. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</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: B4C04E8AB305D4F50AB3</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 21.15</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</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: B0C9628DB4E1C4F388B1</p> <p>Date of Disbursement 01 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 171.32</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</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: B837C520E1904424A860</p> <p>Date of Disbursement 01 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 59.20</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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) The Cleaver Company Mailing Address 75 Ninth Avenue City New York State NY Zip Code 10011 Purpose of Disbursement repayment of debt 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: B4192A95FF64A4AD2BBE Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 378.20
B.	Full Name (Last, First, Middle Initial) The Des Moines Embassy Club Mailing Address 801 Grand Avenue Suite 4000 City Des Moines State IA Zip Code 50309-2762 Purpose of Disbursement repayment of debt 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: B205CBFD0E3B34BF2A00 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 4451.20
C.	Full Name (Last, First, Middle Initial) The Dubuque Leader Mailing Address 1527 Central Avenue City Dubuque State IA Zip Code 52004 Purpose of Disbursement repayment of debt 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: BBC24A9A9E09340D9A6C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 360.50

SUBTOTAL of Disbursements This Page (optional) ▶	5189.90
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)

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<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. Full Name (Last, First, Middle Initial) The Hotel Fort Des Moines</p> <p>Mailing Address 1000 Walnut Street</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Lodging</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: B0D3CB0794733449CAFC Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 399.22</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) The Kirkwood</p> <p>Mailing Address 400 Walnut Street</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement repayment of debt</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: B40521F3187FE453EBA6 Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 757.17</p>
<p>C. Full Name (Last, First, Middle Initial) The Printer Works</p> <p>Mailing Address 3481 Arden Road</p> <p>City Hayward State CA Zip Code 94545</p> <p>Purpose of Disbursement repayment of debt</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: BBBB3B592A56A4D35A6A Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 819.44</p>

SUBTOTAL of Disbursements This Page (optional)	1576.61
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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) TiVo Inc.	Transaction ID: B811C4B985D334CC48BB
	Mailing Address 2160 Gold Street P.O. Box 2160	Date of Disbursement MM / DD / YYYY 01 / 27 / 2009
	City Alviso State CA Zip Code 95002-2160	Amount of Each Disbursement this Period 25.09
	Purpose of Disbursement Cable	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) TiVo Inc.	Transaction ID: B04BF03591FDE42F69D0
	Mailing Address 2160 Gold Street P.O. Box 2160	Date of Disbursement MM / DD / YYYY 02 / 22 / 2008
	City Alviso State CA Zip Code 95002-2160	Amount of Each Disbursement this Period 12.95
	Purpose of Disbursement Cable Service	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) TiVo Inc.	Transaction ID: B339B6BB983E44ABB8CF
	Mailing Address 2160 Gold Street P.O. Box 2160	Date of Disbursement MM / DD / YYYY 02 / 24 / 2008
	City Alviso State CA Zip Code 95002-2160	Amount of Each Disbursement this Period 29.90
	Purpose of Disbursement Cable Service	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	25.09
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) TiVo Inc.</p> <p>Mailing Address 2160 Gold Street P.O. Box 2160</p> <p>City Alviso State CA Zip Code 95002-2160</p> <p>Purpose of Disbursement Cable Service</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: B1E3439F6704648D8A9E</p> <p>Date of Disbursement 02 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 16.95</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Travelers</p> <p>Mailing Address CL & Specialty Remittance Center Remittance Box 96359</p> <p>City Hartford State CT Zip Code 06183-1008</p> <p>Purpose of Disbursement repayment of debt</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: B2565C6C6C949461FA27</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 9619.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) TVEyes, Inc.</p> <p>Mailing Address 2150 Post Road</p> <p>City Fairfield State CT Zip Code 06824</p> <p>Purpose of Disbursement repayment of debt</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: B9DF70F71DA0F453CAC6</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10119.00

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. Full Name (Last, First, Middle Initial) TVEyes, Inc.</p> <p>Mailing Address 2150 Post Road</p> <p>City Fairfield State CT Zip Code 06824</p> <p>Purpose of Disbursement repayment of debt</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: B938BCCA21FE34BA89E6</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) TVEyes, Inc.</p> <p>Mailing Address 2150 Post Road</p> <p>City Fairfield State CT Zip Code 06824</p> <p>Purpose of Disbursement repayment of debt</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: B93F1541FFEDA4526BF3</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) U Save Auto Rental</p> <p>Mailing Address 200 Prospect Avenue</p> <p>City Hartford State CT Zip Code 06106-2928</p> <p>Purpose of Disbursement Transportation</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: B6336D26D851E4068B44</p> <p>Date of Disbursement MM / DD / YYYY 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period -1056.41</p> <p>Category/Type</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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) U Save Auto Rental Mailing Address 200 Prospect Avenue City Hartford State CT Zip Code 06106-2928 Purpose of Disbursement Transportation 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: BEF6AA0756FF742BCB3E Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period -1056.41 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) United Airlines Mailing Address P.O. Box6057 City Dearborn State MI Zip Code 48121 Purpose of Disbursement Airfare 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: B42DA73A8D27E44D3AA3 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 7
	Amount of Each Disbursement this Period -2095.09 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) United Airlines Mailing Address P.O. Box6057 City Dearborn State MI Zip Code 48121 Purpose of Disbursement Airfare 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: B0FF250B6261C44BCB25 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7
	Amount of Each Disbursement this Period -565.60 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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:
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<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) Unitil Mailing Address PO BOX 2013 City Concord State NH Zip Code 03302 Purpose of Disbursement repayment of debt 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: BACD1C6A652CF46E29D8 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 115.06
B.	Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 7247-0244 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement repayment of debt 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: BFBDC3C6FD88A4C03A73 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 86.50
C.	Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 7247-0244 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement repayment of debt 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: B53BFFC443FE14D56A1F Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 60.76

SUBTOTAL of Disbursements This Page (optional) ▶

262.32

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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) UPS Mailing Address PO Box 7247-0244 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement repayment of debt 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: BF18B6504A1F5412585B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 126.91
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 7247-0244 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement repayment of debt 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: BC98F334CE5C946FEBA3 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 59.43
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 7247-0244 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement repayment of debt 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: BBBD50EFE7E274321A3B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 427.18
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	613.52
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) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement repayment of debt 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: B3DEBB37637764932913 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 434.09
B.	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Courier Service 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: BD97255E2681D4084AC7 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 55.95 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Shipping 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: BFB4DFF094928472BB0C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 91.91 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	434.09
TOTAL This Period (last page this line number only) ▶	[]

Schedule B-P ITEMIZED DISBURSEMENTS

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<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. Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170</p> <p>Purpose of Disbursement Shipping</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: B86B018924D094788A81</p> <p>Date of Disbursement 02 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 64.03</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170</p> <p>Purpose of Disbursement Shipping</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: B362980E54A764268858</p> <p>Date of Disbursement 02 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 86.50</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 1601 K Street, NW</p> <p>City Washington State DC Zip Code 06107</p> <p>Purpose of Disbursement Airfare</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: B034D54E635E54138803</p> <p>Date of Disbursement 02 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 214.00</p> <p>[MEMO ITEM]</p>

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

Schedule B-P ITEMIZED DISBURSEMENTS

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<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) US Airways <hr/> Mailing Address 1601 K Street, NW <hr/> City Washington State DC Zip Code 06107 <hr/> Purpose of Disbursement Airfare 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: BBD6C5A838E544DD9BD4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.00 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 12 Crossroads Plaza <hr/> City West Hartford State CT Zip Code 06117 <hr/> Purpose of Disbursement Postage 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: BC7863F2E0394426AB34 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3.00 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) USRental.com <hr/> Mailing Address 970 Summer Street <hr/> City Stamford State CT Zip Code 06905-5542 <hr/> Purpose of Disbursement repayment of debt 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: BCAFD072FE9FD4C8EAB4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4658.70

SUBTOTAL of Disbursements This Page (optional) ▶

4658.70

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

Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<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) USRental.com <hr/> Mailing Address 970 Summer Street <hr/> City State Zip Code Stamford CT 06905-5542 <hr/> Purpose of Disbursement Computer Rental 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: BBAA4F92130F74674B37 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4658.70 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address P.O. Box 15041 <hr/> City State Zip Code Worcester MA 01615-0023 <hr/> Purpose of Disbursement Telephones 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: B27F08A8390DA4B5B8EF Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4105.19 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 660720 <hr/> City State Zip Code Dallas TX 75266 <hr/> Purpose of Disbursement Telephone 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: B9AC6C06A418646159CC Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 23.84 <hr/> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

4105.19

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 60 / 125

<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) Verizon Mailing Address 8808 Irvine Center Drive City Irvine State CA Zip Code 92618-4201 Purpose of Disbursement Monthly Phone Charges 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: B983F8E4487464E31BD8 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 17797.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Voxel.net inc Mailing Address 29 Broadway, 30th Floor City New York State NY Zip Code 10006-3216 Purpose of Disbursement repayment of debt 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: BB34302FFF58F479E90D Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 2459.50
C.	Full Name (Last, First, Middle Initial) Voxel.net inc Mailing Address 29 Broadway, 30th Floor City New York State NY Zip Code 10006-3216 Purpose of Disbursement repayment of debt 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: B75F73B2F1B7C48B3B9E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 4919.00

SUBTOTAL of Disbursements This Page (optional) ▶	7378.50
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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) Voxel.net inc Mailing Address 29 Broadway, 30th Floor City New York State NY Zip Code 10006-3216 Purpose of Disbursement Web Hosting 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: BBCA3E2B6E5714377997 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 2459.50 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Washington Promotions & Printing Mailing Address 5125 MacArthur Blvd. NW Suite 14 City Washington State DC Zip Code 20016 Purpose of Disbursement repayment of debt 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: B4982DFD64E644B45848 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 5547.90
C.	Full Name (Last, First, Middle Initial) Webster Bank Mailing Address 185 Asylum Street City Hartford State CT Zip Code 06103-3401 Purpose of Disbursement repayment of debt 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: B0FA22F38DD3F4F6DA77 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 4177.74

SUBTOTAL of Disbursements This Page (optional) ▶

9725.64

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) Webster Bank <hr/> Mailing Address 185 Asylum Street <hr/> City Hartford State CT Zip Code 06103-3401 <hr/> Purpose of Disbursement repayment of debt 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: B4F8BE9F8B00A45C6A69 Date of Disbursement 02 / 18 / 2009 <hr/> Amount of Each Disbursement this Period 1625.86
B.	Full Name (Last, First, Middle Initial) Webster Bank <hr/> Mailing Address 185 Asylum Street <hr/> City Hartford State CT Zip Code 06103-3401 <hr/> Purpose of Disbursement repayment of debt 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: BED0062E2BD1D4F4B90F Date of Disbursement 02 / 18 / 2009 <hr/> Amount of Each Disbursement this Period 7056.90
C.	Full Name (Last, First, Middle Initial) Webster Bank <hr/> Mailing Address 185 Asylum Street <hr/> City Hartford State CT Zip Code 06103-3401 <hr/> Purpose of Disbursement repayment of debt 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: B4BC4251A6ABD44AB9D0 Date of Disbursement 02 / 18 / 2009 <hr/> Amount of Each Disbursement this Period 5700.90

SUBTOTAL of Disbursements This Page (optional) ▶

14383.66

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. Full Name (Last, First, Middle Initial) Wired for Change, Inc.</p> <p>Mailing Address 1700 Connecticut Ave., NW Suite 403</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement repayment of debt</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: B50095CB6A00241298F2</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Kathryn Damato</p> <p>Mailing Address 10 Blackhawk Lane</p> <p>City West Hartford State CT Zip Code 06117</p> <p>Purpose of Disbursement Salary</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: BED6C2B1EFD3B468CB9C</p> <p>Date of Disbursement MM / DD / YYYY 01 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 1903.16</p>
<p>C. Full Name (Last, First, Middle Initial) Kathryn Damato</p> <p>Mailing Address 10 Blackhawk Lane</p> <p>City West Hartford State CT Zip Code 06117</p> <p>Purpose of Disbursement Salary</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: BC4F5653E9A2F4C9EBFE</p> <p>Date of Disbursement MM / DD / YYYY 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1903.17</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>7806.33</p>
<p>TOTAL This Period (last page this line number only)</p>	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 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

Transaction ID: BFEA0485576FE4F5899C

Date of Disbursement

Mailing Address 10 Blackhawk Lane

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	9

City State Zip Code
West Hartford CT 06117

Amount of Each Disbursement this Period

1074.83

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1074.83

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

290537.95

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" 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)
Stanford Financial Receiver

Transaction ID: B2B6CDA9867D6483CAB9

Date of Disbursement

Mailing Address
Ralph S. Janvey
2100 Ross Avenue

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

City State Zip Code
Dallas TX 75201-2739

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

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

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 67 / 125	
	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 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)

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			
City Des Moines	State IA	ZIP Code 50316	

Outstanding Balance Beginning This Period		Transaction ID: D3239DDE2C2B14D02B40	
7233.31			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	7233.31	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hinckley Springs			Nature of Debt (Purpose): Water Cooler Services
Mailing Address P.O. Box 660579			
City Dallas	State TX	ZIP Code 75266-0579	

Outstanding Balance Beginning This Period		Transaction ID: DE674F26EC06645DDB95	
306.68			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	306.68	0.00	

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

Outstanding Balance Beginning This Period		Transaction ID: DC7364FE5C9E54CCCA73	
427.18			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	427.18	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	7233.31
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 UPS	Nature of Debt (Purpose): Shipping
Mailing Address PO Box 7247-0244	
City Philadelphia State PA ZIP Code 19170	

Outstanding Balance Beginning This Period 434.09	Transaction ID: D93A99FFBC04A4242996	
Amount Incurred This Period 0.00	Payment This Period 434.09	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 60.76	Transaction ID: D6EB2D896D8C64BA8AA9	
Amount Incurred This Period 0.00	Payment This Period 60.76	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 126.91	Transaction ID: D46BD2137637F4679A43	
Amount Incurred This Period 0.00	Payment This Period 126.91	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
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 Dubuque Leader			Nature of Debt (Purpose): Printing
Mailing Address 1527 Central Avenue			
City Dubuque	State IA	ZIP Code 52004	

Outstanding Balance Beginning This Period <input type="text" value="360.50"/>		Transaction ID: D308E0032B374413E8A3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="360.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedar Rapids Municipal Utilities			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3255			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period <input type="text" value="165.81"/>		Transaction ID: D9457B91CEE0540E8A08	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="165.81"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kilkenney's			Nature of Debt (Purpose): Food & Beverage
Mailing Address 300 West 3rd Street			
City Davenport	State IA	ZIP Code 52801-1208	

Outstanding Balance Beginning This Period <input type="text" value="220.00"/>		Transaction ID: DE9F171102B294984BCD	
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="220.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="220.00"/>
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)

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 Cox Communications			Nature of Debt (Purpose): Internet Services
Mailing Address PO Box 6059			
City Cypress	State CA	ZIP Code 90630	

Outstanding Balance Beginning This Period <input type="text" value="138.02"/>		Transaction ID: DEAECEB41D358C496EAEB	
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="138.02"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Frontline Productions			Nature of Debt (Purpose): Lighting & Video
Mailing Address 125 Hemlock Drive			
City Deep River	State CT	ZIP Code 06417	

Outstanding Balance Beginning This Period <input type="text" value="885.00"/>		Transaction ID: DF269F8B8076845BAB94	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="885.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. 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 Des Moines	State IA	ZIP Code 50315	

Outstanding Balance Beginning This Period <input type="text" value="436.60"/>		Transaction ID: D42D026888D4F47D198F	
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="436.60"/>	

1) SUBTOTALS This Period This Page (optional).....	574.62
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 72 / 125
	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 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

B. 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

C. 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

1) SUBTOTALS This Period This Page (optional).....	50267.24
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 73 / 125	
	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 ExxonMobil	Nature of Debt (Purpose): Gasoline
Mailing Address P.O. Box 688938	
City State ZIP Code Des Moines IA 50368-8938	

Outstanding Balance Beginning This Period 241.86	Transaction ID: D303F42DD72104352BB3	
Amount Incurred This Period 0.00	Payment This Period 241.86	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ExxonMobil	Nature of Debt (Purpose): Gasoline
Mailing Address P.O. Box 688938	
City State ZIP Code Des Moines IA 50368-8938	

Outstanding Balance Beginning This Period 429.36	Transaction ID: D2591D51138CC454BA3F	
Amount Incurred This Period 0.00	Payment This Period 429.36	Outstanding Balance at Close of This Period 0.00

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 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

1) SUBTOTALS This Period This Page (optional).....	▶	1055.11
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 74 / 125	
	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 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 304.30	Transaction ID: DD45DB76A7149485EADE	
Amount Incurred This Period 0.00	Payment This Period 304.30	Outstanding Balance at Close of This Period 0.00

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 1861.62	Transaction ID: DFE38B3A3574543178FC	
Amount Incurred This Period 0.00	Payment This Period 1861.62	Outstanding Balance at Close of This Period 0.00

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).....	▶	1064.16
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) PAGE 76 / 125
 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 Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="25037.09"/>	Transaction ID: D2550339EB07C40E994D
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="25037.09"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="25233.00"/>	Transaction ID: DDAAD6917DA7140B1B6D
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="25233.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="25134.72"/>	Transaction ID: D2900156C49674E41A2B
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="25134.72"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="0.00"/>
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 Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 20016.20	Transaction ID: D14FCCBCA21B449EB877	
Amount Incurred This Period 0.00	Payment This Period 20016.20	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers	Nature of Debt (Purpose): Copier
Mailing Address 325 Grand Avenue P.O. Box 1755	
City State ZIP Code Des Moines IA 50306	

Outstanding Balance Beginning This Period 126.82	Transaction ID: DFAE4308D10124EEDA3	
Amount Incurred This Period 0.00	Payment This Period 126.82	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers	Nature of Debt (Purpose): Copier
Mailing Address 325 Grand Avenue P.O. Box 1755	
City State ZIP Code Des Moines IA 50306	

Outstanding Balance Beginning This Period 211.99	Transaction ID: D3C51D93654FD40B59BB	
Amount Incurred This Period 0.00	Payment This Period 211.99	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
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)	PAGE 79 / 125
	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 Verizon	Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive	
City State ZIP Code Irvine CA 92618-4201	

Outstanding Balance Beginning This Period <input type="text" value="285.25"/>	Transaction ID: D59D402EB48494DF2B2C	
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="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 State ZIP Code Irvine CA 92618-4201	

Outstanding Balance Beginning This Period <input type="text" value="660.55"/>	Transaction ID: D0F58D7FEFA5B4E43939	
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="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 State ZIP Code Irvine CA 92618-4201	

Outstanding Balance Beginning This Period <input type="text" value="625.92"/>	Transaction ID: D7AA61021F4A546ABB58	
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="625.92"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1571.72"/>
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)

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 <input type="text" value="364.55"/>		Transaction ID: DC3EE07A89ADF414596B	
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="364.55"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ABC-Electrical Contractors			Nature of Debt (Purpose): Phone Work
Mailing Address 10520 Hickman Road Suite ABC			
City Des Moines	State IA	ZIP Code 50325	

Outstanding Balance Beginning This Period <input type="text" value="1866.01"/>		Transaction ID: DADFAFC251E1148F6B40	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1866.01"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Simard Printing			Nature of Debt (Purpose): Printing Services
Mailing Address 300 Salem Street			
City Woburn	State MA	ZIP Code 01801-2055	

Outstanding Balance Beginning This Period <input type="text" value="433.13"/>		Transaction ID: DAEB900B19D5343069F1	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="433.13"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="364.55"/>
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 81 / 125
	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 Old Town Family Restaurant	Nature of Debt (Purpose): Food & Beverage
Mailing Address 2107 Camanche Avenue	
City State ZIP Code Clinton IA 52732-6036	

Outstanding Balance Beginning This Period 130.00	Transaction ID: D8B59DA12044449C0AE9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MoreSound Company	Nature of Debt (Purpose): Sound Equipment
Mailing Address 102 North Street	
City State ZIP Code Jaffrey NH 03452-5301	

Outstanding Balance Beginning This Period 400.00	Transaction ID: D4310E2A2AC3D49AFB1C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Washington Promotions & Printing	Nature of Debt (Purpose): Printing
Mailing Address 5125 MacArthur Blvd. NW Suite 14	
City State ZIP Code Washington DC 20016	

Outstanding Balance Beginning This Period 5547.90	Transaction ID: DE815690D20EF4A6EB02	
Amount Incurred This Period 0.00	Payment This Period 5547.90	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	530.00
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 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	Transaction ID: DC07FD8583E3F4BA58CA	
58.58		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	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	Transaction ID: D160BB52601F3469FBFA	
657.85		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	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	Transaction ID: DF660180FF5C543E886F	
677.36		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	677.36

1) SUBTOTALS This Period This Page (optional).....	1393.79
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 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 540.80	Transaction ID: D4DB84BA83BD34248B12	
Amount Incurred This Period 0.00	Payment This Period 540.80	Outstanding Balance at Close of This Period 0.00

C. 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 401.72	Transaction ID: D5B3618F71E3745EC9DD	
Amount Incurred This Period 0.00	Payment This Period 401.72	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	622.51
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 87 / 125
	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 Alliant Energy	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066	
City Cedar Rapids State IA ZIP Code 52406	

Outstanding Balance Beginning This Period 852.59	Transaction ID: D21C371285AF1401F9CB	
Amount Incurred This Period 0.00	Payment This Period 852.59	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 263.55	Transaction ID: DBA39930B48064589AB5	
Amount Incurred This Period 0.00	Payment This Period 263.55	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 50.75	Transaction ID: DF36117C0589D4D9C911	
Amount Incurred This Period 0.00	Payment This Period 50.75	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
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 Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 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	

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

Outstanding Balance Beginning This Period 239.60		Transaction ID: DE6029EBE091B415FB6D	
Amount Incurred This Period 0.00	Payment This Period 239.60	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 254.12		Transaction ID: D637921B16CAA45B19B6	
Amount Incurred This Period 0.00	Payment This Period 254.12	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	877.55
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 89 / 125	
	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 Allied Telecom	Nature of Debt (Purpose): Internet Services
Mailing Address PO BOX 758792	
City State ZIP Code Baltimore MD 21275	

Outstanding Balance Beginning This Period 850.00	Transaction ID: DEA9D9C89FC7F444DAD8	
Amount Incurred This Period 0.00	Payment This Period 850.00	Outstanding Balance at Close of This Period 0.00

B. 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

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

1) SUBTOTALS This Period This Page (optional).....	▶	2592.52
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 90 / 125
	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 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 250.36	Transaction ID: DF8C3EA191F814F5C94C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.36

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

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

Outstanding Balance Beginning This Period 635.01	Transaction ID: DF03B1B1603F54C5183C	
Amount Incurred This Period 0.00	Payment This Period 635.01	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	400.45
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 91 / 125	
	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 Travelers	Nature of Debt (Purpose): Insurance
Mailing Address CL & Specialty Remittance Center Remittance Box 96359	
City State ZIP Code Hartford CT 06183-1008	

Outstanding Balance Beginning This Period 9619.00	Transaction ID: D490B4AF8A85D4E99B96	
Amount Incurred This Period 0.00	Payment This Period 9619.00	Outstanding Balance at Close of This Period 0.00

B. 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 State ZIP Code Washington DC 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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc.	Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road	
City State ZIP Code Fairfield CT 06824	

Outstanding Balance Beginning This Period 500.00	Transaction ID: D80E35642DA924E9798A	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	6000.00
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 TVEyes, Inc.			Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road			
City Fairfield	State CT	ZIP Code 06824	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>		Transaction ID: DF1403972FFAD472384D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc.			Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road			
City Fairfield	State CT	ZIP Code 06824	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>		Transaction ID: D421D5108046A4FA4973	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. 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 <input type="text" value="910.28"/>		Transaction ID: DE2E3D979014F4B2194A	
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="910.28"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="910.28"/>
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)

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 & Internet
Mailing Address PO Box 1577			
City Newark	State NJ	ZIP Code 07101	

Outstanding Balance Beginning This Period <input type="text" value="351.30"/>		Transaction ID: D3A3A16E658A34B44B21	
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="351.30"/>	

B. 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 <input type="text" value="513.74"/>		Transaction ID: D054E2AB68F284AAA9A7	
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="513.74"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360			
City Manchester	State NH	ZIP Code 03105-0360	

Outstanding Balance Beginning This Period <input type="text" value="246.08"/>		Transaction ID: DE82D6F912C4D47CB9A5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="246.08"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="865.04"/>
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 94 / 125
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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 Public Service of New Hampshire	Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360	
City State ZIP Code Manchester NH 03105-0360	

Outstanding Balance Beginning This Period <input type="text" value="376.44"/>	Transaction ID: DD1D454DB157C4318B67	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="376.44"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire	Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360	
City State ZIP Code Manchester NH 03105-0360	

Outstanding Balance Beginning This Period <input type="text" value="993.78"/>	Transaction ID: D5B30D2CCB1A941208DC	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="993.78"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire	Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360	
City State ZIP Code Manchester NH 03105-0360	

Outstanding Balance Beginning This Period <input type="text" value="131.82"/>	Transaction ID: D5B0C3B4DA75E4096B6A	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="131.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
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)

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 Pentimento Design LLC			Nature of Debt (Purpose): Reindeer decorations
Mailing Address 1133 Mapleton Avenue			
City Suffield	State CT	ZIP Code 06078	

Outstanding Balance Beginning This Period 212.00		Transaction ID: DF4C1AA581F164ADAB6A	
Amount Incurred This Period 0.00	Payment This Period 212.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mason City Public Utilities			Nature of Debt (Purpose): Utilities
Mailing Address 10 First Street Northwest			
City Mason City	State IA	ZIP Code 50401-3224	

Outstanding Balance Beginning This Period 123.36		Transaction ID: DDE7D15C566704EE4997	
Amount Incurred This Period 0.00	Payment This Period 123.36	Outstanding Balance at Close of This Period 0.00	

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

1) SUBTOTALS This Period This Page (optional).....	▶	130.78
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
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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 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	

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	6497.57
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 97 / 125	
	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 VFW Post 775	Nature of Debt (Purpose): Space Rental
Mailing Address 702 West Main Street	
City State ZIP Code Ottumwa IA 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

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	1454.43
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 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	

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 694.96		Transaction ID: D7AA2635D35294D99959	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 694.96	

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 647.11		Transaction ID: DC05308729895455AAF0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 647.11	

1) SUBTOTALS This Period This Page (optional).....	▶	2238.14
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 1646.22		Transaction ID: D684E05F5028F4B9FA8C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1646.22	

B. 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 West Des Moines	State IA	ZIP Code 50265	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Des Moines Water Works			Nature of Debt (Purpose): Utilities
Mailing Address 2201 George Flagg Parkway			
City Des Moines	State IA	ZIP Code 50321-1190	

Outstanding Balance Beginning This Period 117.91		Transaction ID: D1475748209CF4A0092F	
Amount Incurred This Period 0.00	Payment This Period 117.91	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1752.22
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 REMAX Results Realty			Nature of Debt (Purpose): Rent and Utilities
Mailing Address 202 1st NW			
City Mason City	State IA	ZIP Code 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	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jocelyn Augustino Photogrpaher			Nature of Debt (Purpose): Photographer
Mailing Address 3416 Gunston Road			
City Alexandria	State VA	ZIP Code 22302-2134	

Outstanding Balance Beginning This Period		Transaction ID: D0781506CE4AC48A0805	
69.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	69.00	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Deaf Services Unlimited			Nature of Debt (Purpose): Interpreting Service
Mailing Address Suite 170			
City Des Moines	State IA	ZIP Code 50309	

Outstanding Balance Beginning This Period		Transaction ID: DF8A44964B3424CC3B77	
130.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	130.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1036.46
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)

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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 Extra Space Storage			Nature of Debt (Purpose): Storage
Mailing Address 132 Silas Deane Highway			
City Wethersfield	State CT	ZIP Code 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	

B. 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 Gaithersburg	State MD	ZIP Code 20879	

Outstanding Balance Beginning This Period		Transaction ID: DCDE895EA2CFC4A338ED	
32.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	32.50	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NexGen			Nature of Debt (Purpose): Utilities
Mailing Address 10500 Hickman Road Ste J			
City Clive	State IA	ZIP Code 50325-3706	

Outstanding Balance Beginning This Period		Transaction ID: D2FBA9339003447ADB22	
224.86			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	224.86	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	121.54
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)	▶	

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DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 102 / 125
 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 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"/>	

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="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"/>	

C. 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 State ZIP Code Des Moines IA 50312	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="400.00"/>	Transaction ID: D5CA66406DA5143F7848
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="400.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="511.51"/>
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

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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 Big Ten Rentals, Inc.	Nature of Debt (Purpose): Bases
Mailing Address 1820 Boyrum St	
City State ZIP Code Iowa City IA 52240-4555	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">34.82</div>	Transaction ID: D9CE80039AE0F470B870
Amount Incurred This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>	Payment This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">34.82</div>	

B. 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 State ZIP Code Washington DC 20013	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">5.00</div>	Transaction ID: DF17F5AFCCC744C43A1E
Amount Incurred This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>	Payment This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">5.00</div>	

C. 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 State ZIP Code San Francisco CA 94108	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">537.08</div>	Transaction ID: DDB39DC1EDB03445B8B5
Amount Incurred This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>	Payment This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">537.08</div>	

1) SUBTOTALS This Period This Page (optional).....	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">576.90</div>
2) TOTALS This Period (last page this line number only).....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

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 Bi-State Cartridge Service, Inc.			Nature of Debt (Purpose): Office Supplies
Mailing Address 1325 15th Street			
City Moline	State IL	ZIP Code 61265	

Outstanding Balance Beginning This Period <input type="text" value="130.54"/>		Transaction ID: D163D453900874450889	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="130.54"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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 <input type="text" value="83.52"/>		Transaction ID: D8A78FBAECFAE431F9D3	
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="83.52"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Air Charter Team, Inc.			Nature of Debt (Purpose): Transportation
Mailing Address 10015 N.W. Ambassador Drive Suite 202			
City Kansas City	State MO	ZIP Code 64153	

Outstanding Balance Beginning This Period <input type="text" value="1304.61"/>		Transaction ID: DCAA2DBC5CEA94CD089C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1304.61"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="83.52"/>
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)

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Printer Works			Nature of Debt (Purpose): Printer
Mailing Address 3481 Arden Road			
City Hayward	State CA	ZIP Code 94545	

Outstanding Balance Beginning This Period 819.44		Transaction ID: DFC2998A4374B4E86BCA	
Amount Incurred This Period 0.00	Payment This Period 819.44	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 1406.57		Transaction ID: DB92957A464EF4AC685D	
Amount Incurred This Period 0.00	Payment This Period 1406.57	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	2500.00
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 MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period 1115.75		Transaction ID: DEC21CC9229D5404F97B	
Amount Incurred This Period 0.00	Payment This Period 1115.75	Outstanding Balance at Close of This Period 0.00	

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 Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period 78.77		Transaction ID: D2F929A7374FC4A50B84	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 78.77	

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

Outstanding Balance Beginning This Period 72.04		Transaction ID: D275E706E6F7F4C6C938	
Amount Incurred This Period 0.00	Payment This Period 72.04	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	78.77
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 MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period <input type="text" value="659.58"/>		Transaction ID: DFC448EB6B1054323A65	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="659.58"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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 Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period <input type="text" value="196.90"/>		Transaction ID: DAB442CA849544E83A13	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="196.90"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="65.24"/>		Transaction ID: D7B3E6DAFE5CE4AFB9B8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="65.24"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
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)

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 MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period 416.01		Transaction ID: D91E4CB1724CB455C94A	
Amount Incurred This Period 0.00	Payment This Period 416.01	Outstanding Balance at Close of This Period 0.00	

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 Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period 123.36		Transaction ID: DF30D747F375F47E5882	
Amount Incurred This Period 0.00	Payment This Period 123.36	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 811.87		Transaction ID: DF6D9496BDF604118AD8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 811.87	

1) SUBTOTALS This Period This Page (optional).....	811.87
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

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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 Peter Nichols			Nature of Debt (Purpose): Consulting Fee
Mailing Address 222 Stony Brook Road			
City Hopewell	State NJ	ZIP Code 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 Waltham	State MA	ZIP Code 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 Waltham	State MA	ZIP Code 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 Jim VanDusseldorp			Nature of Debt (Purpose): Bus Servicing
Mailing Address 2406 15th Ave. N.			
City Clear Lake	State IA	ZIP Code 50428-2037	

Outstanding Balance Beginning This Period <input type="text" value="92.50"/>		Transaction ID: DECE5259C4BB240ADB7	
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"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northern Business Machines			Nature of Debt (Purpose): Rental
Mailing Address 24 Terry Avenue			
City Burlington	State MA	ZIP Code 01803	

Outstanding Balance Beginning This Period <input type="text" value="698.00"/>		Transaction ID: DF72BE3ADBBB14CB9BC7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="698.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Until			Nature of Debt (Purpose): Utilities
Mailing Address PO BOX 2013			
City Concord	State NH	ZIP Code 03302	

Outstanding Balance Beginning This Period <input type="text" value="115.06"/>		Transaction ID: D14B3EB6706674783815	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="115.06"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="92.50"/>
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)

FOR LINE NUMBER: (check only one)

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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 Grand Colony			Nature of Debt (Purpose): Lodging
Mailing Address 2824 Grand Avenue, #218			
City Des Moines	State IA	ZIP Code 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 Webster Bank			Nature of Debt (Purpose): Loan interest payment
Mailing Address 185 Asylum Street			
City Hartford	State CT	ZIP Code 06103-3401	

Outstanding Balance Beginning This Period 4177.74		Transaction ID: D2455C9526EE244CC9BA	
Amount Incurred This Period 0.00	Payment This Period 4177.74	Outstanding Balance at Close of This Period 0.00	

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 Aurora	State IL	ZIP Code 60572	

Outstanding Balance Beginning This Period 111.80		Transaction ID: D51DCEF2884624EE6A6A	
Amount Incurred This Period 0.00	Payment This Period 111.80	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	153.50
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 PMI	Nature of Debt (Purpose): Parking	
Mailing Address Parking Management, Inc. 1725 DeSales Street NW		
City Washington State DC ZIP Code 20036-4406		

Outstanding Balance Beginning This Period 465.00	Transaction ID: D8747457AA9894F1CB0C	
Amount Incurred This Period 0.00	Payment This Period 465.00	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 59.43	Transaction ID: DBA9563936FE04325AD0	
Amount Incurred This Period 0.00	Payment This Period 59.43	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing	Nature of Debt (Purpose): Finance Charge	
Mailing Address 1739 East Grand Avenue		
City Des Moines State IA ZIP Code 50316		

Outstanding Balance Beginning This Period 110.59	Transaction ID: D7499897E1ABB4EE2962	
Amount Incurred This Period 0.00	Payment This Period 110.59	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
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 113 / 125
	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 Northland Trumbull, LLC	Nature of Debt (Purpose): Rent
Mailing Address C/o Northland Investment Corporati P.O. Box 845604	
City State ZIP Code Boston MA 02284	

Outstanding Balance Beginning This Period <input type="text" value="3850.00"/>	Transaction ID: D27B30042D3C24348857	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3850.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. 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 <input type="text" value="215.00"/>	Transaction ID: D92D91DF93AE6487B8F3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="215.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank	Nature of Debt (Purpose): Loan Interest payment
Mailing Address 185 Asylum Street	
City State ZIP Code Hartford CT 06103-3401	

Outstanding Balance Beginning This Period <input type="text" value="7056.90"/>	Transaction ID: DA8EF061F679D4CBB9F4	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="7056.90"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
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 114 / 125
	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 Pitney Bowes	Nature of Debt (Purpose): Postage
Mailing Address PO Box 856390	
City State ZIP Code Louisville KY 40285	

Outstanding Balance Beginning This Period 5522.57	Transaction ID: D87D4786A18704E3E866	
Amount Incurred This Period 0.00	Payment This Period 5522.57	Outstanding Balance at Close of This Period 0.00

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 The Kirkwood	Nature of Debt (Purpose): Rent
Mailing Address 400 Walnut Street	
City State ZIP Code Des Moines IA 50309	

Outstanding Balance Beginning This Period 757.17	Transaction ID: DF06ED48AFB25453C90A	
Amount Incurred This Period 0.00	Payment This Period 757.17	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	32233.24
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 115 / 125
	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 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

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

Outstanding Balance Beginning This Period 86.50	Transaction ID: D42C8F3A7325E4A5A80E	
Amount Incurred This Period 0.00	Payment This Period 86.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedar Rapids Municipal Utilities	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3255	
City State ZIP Code Cedar Rapids IA 52406	

Outstanding Balance Beginning This Period 57.90	Transaction ID: D0E366AACBEEB484CB02	
Amount Incurred This Period 0.00	Payment This Period 57.90	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	23250.00
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 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		Transaction ID: DF4C21A8864FF4D46B53	
1199.40			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1199.40	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor			
City	State	ZIP Code	
Seattle	WA	98101-3099	

Outstanding Balance Beginning This Period		Transaction ID: D76E8E67033CC4385B66	
10000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	10000.00	0.00	

C. 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		Transaction ID: DD71C9A3EFA0F4512B37	
59.95			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	59.95	

1) SUBTOTALS This Period This Page (optional).....	▶	1259.35
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

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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 Northland Trumbull, LLC	Nature of Debt (Purpose): Rent
Mailing Address C/o Northland Investment Corporati P.O. Box 845604	
City State ZIP Code Boston MA 02284	

Outstanding Balance Beginning This Period 3850.00	Transaction ID: D62DA2D977A734EC594A	
Amount Incurred This Period 0.00	Payment This Period 3850.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank	Nature of Debt (Purpose): Interest payment
Mailing Address 185 Asylum Street	
City State ZIP Code Hartford CT 06103-3401	

Outstanding Balance Beginning This Period 5700.90	Transaction ID: DDD808CCF6F3F461FA47	
Amount Incurred This Period 0.00	Payment This Period 5700.90	Outstanding Balance at Close of This Period 0.00

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 623.00	Transaction ID: D4FFB54806211448B923	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 623.00

1) SUBTOTALS This Period This Page (optional).....	623.00
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)	

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DEBTS AND OBLIGATIONS
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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 Northland Trumbull, LLC	Nature of Debt (Purpose): Rent
Mailing Address C/o Northland Investment Corporati P.O. Box 845604	
City State ZIP Code Boston MA 02284	

Outstanding Balance Beginning This Period 3850.00	Transaction ID: DA4696BC628A349F7971	
Amount Incurred This Period 0.00	Payment This Period 3850.00	Outstanding Balance at Close of This Period 0.00

B. 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 280.43	Transaction ID: D65530D3150B143C5BDD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 280.43

C. 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 748.02	Transaction ID: DAC0405B098BA40BDB8F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 748.02

1) SUBTOTALS This Period This Page (optional).....	1028.45
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

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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 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 3197.74	Transaction ID: D80F5A221749E4D8CAFD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3197.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank	Nature of Debt (Purpose): Interest Payment
Mailing Address 185 Asylum Street	
City State ZIP Code Hartford CT 06103-3401	

Outstanding Balance Beginning This Period 1625.86	Transaction ID: D6D0173F2D16C488496D	
Amount Incurred This Period 0.00	Payment This Period 1625.86	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voxel.net inc	Nature of Debt (Purpose): Web Hosting
Mailing Address 29 Broadway, 30th Floor	
City State ZIP Code New York NY 10006-3216	

Outstanding Balance Beginning This Period 2459.50	Transaction ID: DC06AE5CA3EED49569AE	
Amount Incurred This Period 0.00	Payment This Period 2459.50	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	3197.74
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)

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 Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 10009.00	Transaction ID: DF0B7FFEB54884D8496F	
Amount Incurred This Period 0.00	Payment This Period 10009.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing	Nature of Debt (Purpose): Finance Charge
Mailing Address 1739 East Grand Avenue	
City State ZIP Code Des Moines IA 50316	

Outstanding Balance Beginning This Period 111.89	Transaction ID: DD996084ABB46436095F	
Amount Incurred This Period 0.00	Payment This Period 111.89	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Cleaver Company	Nature of Debt (Purpose): Food & Beverage
Mailing Address 75 Ninth Avenue	
City State ZIP Code New York NY 10011	

Outstanding Balance Beginning This Period 378.20	Transaction ID: D30F04EAEC434423A83D	
Amount Incurred This Period 0.00	Payment This Period 378.20	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
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)

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wired for Change, Inc.			Nature of Debt (Purpose): Internet Services
Mailing Address 1700 Connecticut Ave., NW Suite 403			
City Washington	State DC	ZIP Code 20009	

Outstanding Balance Beginning This Period 4000.00		Transaction ID: DA09D2641F3154B62833	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voxel.net inc			Nature of Debt (Purpose): Web Hosting
Mailing Address 29 Broadway, 30th Floor			
City New York	State NY	ZIP Code 10006-3216	

Outstanding Balance Beginning This Period 4919.00		Transaction ID: DF06FD864428E4C118ED	
Amount Incurred This Period 0.00	Payment This Period 4919.00	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	120.00
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)	▶	

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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 Hertz	Nature of Debt (Purpose):
Mailing Address 333 W. Harbor Drive	
City State ZIP Code San Diego CA 92101	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Des Moines Embassy Club	Nature of Debt (Purpose): Food & Beverage
Mailing Address 801 Grand Avenue Suite 4000	
City State ZIP Code Des Moines IA 50309-2762	

Outstanding Balance Beginning This Period 4451.20	Transaction ID: DDA7C5EA9B930420A98A	
Amount Incurred This Period 0.00	Payment This Period 4451.20	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Metropolitan Club	Nature of Debt (Purpose): Food & Beverage
Mailing Address One East 60th Street	
City State ZIP Code New York NY 10022	

Outstanding Balance Beginning This Period 21459.11	Transaction ID: D633B2D0BC9E641C0B52	
Amount Incurred This Period 0.00	Payment This Period 21459.11	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	4111.17
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

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FOR LINE NUMBER: (check only one)

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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 USRental.com			Nature of Debt (Purpose): Payment for computers
Mailing Address 970 Summer Street			
City Stamford	State CT	ZIP Code 06905-5542	

Outstanding Balance Beginning This Period 4658.70		Transaction ID: D1F57A4B00A37493E946	
Amount Incurred This Period 0.00	Payment This Period 4658.70	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing			Nature of Debt (Purpose): Printing
Mailing Address 1739 East Grand Avenue			
City Des Moines	State IA	ZIP Code 50316	

Outstanding Balance Beginning This Period 7562.83		Transaction ID: D73B6D84253894C72B62	
Amount Incurred This Period 0.00	Payment This Period 7562.83	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor			
City Seattle	State WA	ZIP Code 98101-3099	

Outstanding Balance Beginning This Period 10017.02		Transaction ID: D137E7211B1E44139A9C	
Amount Incurred This Period 0.00	Payment This Period 10017.02	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
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)	▶	

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DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

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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 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="0.00"/>		Transaction ID: D68AD64DCDC624C69A94	
Amount Incurred This Period <input type="text" value="348.36"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="348.36"/>	

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

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

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2811.72"/>
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"/>

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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 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 0.00	Transaction ID: DC5C4695FC2C6478F875	
Amount Incurred This Period 485.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 485.08

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

1) SUBTOTALS This Period This Page (optional).....	896.53
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