

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Carol Shea-Porter for Congress

ADDRESS (number and street) P.O. Box 453

Check if different than previously reported. (ACC)

Rochester NH 03866

2. **FEC IDENTIFICATION NUMBER** C00419978

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

CITY STATE ZIP CODE STATE DISTRICT

Rochester NH 03866 NH 01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Convention (12C)  Special (12S)

Election on [ ] [ ] [ ] in the State of [ ]

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

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

Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 04 01 2009 through 06 30 2009

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

Type or Print Name of Treasurer C Ann Welsh

Signature of Treasurer Electronically Filed by C Ann Welsh Date 07 15 2009

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Carol Shea-Porter for Congress

Report Covering the Period:

From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	120167.44	233571.91
(b) Total Contribution Refunds (from Line 20(d)).....	500.00	2173.39
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	119667.44	231398.52
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	29199.63	150902.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	18815.02
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	29199.63	132087.42
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	211459.22	
<hr/>		
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Carol Shea-Porter for Congress

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	33601.00	75783.80
(i) Itemized (use Schedule A).....	17794.51	32608.18
(ii) Unitemized.....	51395.51	108391.98
(iii) TOTAL of contributions from individuals..... ▶	196.93	196.93
(b) Political Party Committees.....	68575.00	124983.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	120167.44	233571.91
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	1452.02
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	0.00	18815.02
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	120167.44	253838.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	29199.63	150902.44
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	500.00	2173.39
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	2173.39
21. OTHER DISBURSEMENTS.....	105.00	3165.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	29804.63	156240.83

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	121096.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	120167.44
25. SUBTOTAL (add Line 23 and Line 24).....	241263.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29804.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	211459.22

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Nigel K Donovan

Mailing Address 40 Federation Dr

City Bedford State NH Zip Code 03110

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 02 / 2009  
**Transaction ID:** C5496640

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Nancy L Ball

Mailing Address 41 Rogers Rd

City Gilmanton State NH Zip Code 03237

FEC ID number of contributing federal political committee. C

Name of Employer Shaheen & Gordon, P.A. Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 02 / 2009  
**Transaction ID:** C5496650

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Spiegelman

Mailing Address 18 Windsor Blvd

City Londonderry State NH Zip Code 03053

FEC ID number of contributing federal political committee. C

Name of Employer BeneTemps, Inc Occupation Human Resources Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt 06 / 02 / 2009  
**Transaction ID:** C5496670

Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mary Breasted Smyth

Mailing Address 134 Mt Mexico Rd

City State Zip Code  
Tamworth NH 03886

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Employed Writer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 3800.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

**Transaction ID:** C5509090

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Swanee Hunt

Mailing Address 168 Brattle St

City State Zip Code  
Cambridge MA 02138

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Hunt Alternatives President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 9

**Transaction ID:** C5486210

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Katherine Wells Wheeler

Mailing Address 27 Mill Rd

City State Zip Code  
Durham NH 03824-3006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 9

**Transaction ID:** C5515360

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1400.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Patricia L Frisella

Mailing Address 31 Reservoir Rd

City Farmington State NH Zip Code 03835-4425

FEC ID number of contributing federal political committee. C

Name of Employer Krasner Law Office Occupation Clerk

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5515620

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Barbara B. Broderick

Mailing Address 84 Bunker Hill Ave

City Stratham State NH Zip Code 03885

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 25 / 2009  
**Transaction ID:** C5510610

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Josephine A Lamprey

Mailing Address 16 Atlantic Ave

City North Hampton State NH Zip Code 03862

FEC ID number of contributing federal political committee. C

Name of Employer Lamprey Brothers Occupation Energy Conservation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2009  
**Transaction ID:** C5440331

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Andru H Volinsky  
Mailing Address 488 Shaker Rd  
City Concord State NH Zip Code 03301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bernstein Shur Occupation Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00  
Date of Receipt MM / DD / YYYY  
06 / 02 / 2009  
**Transaction ID:** C5496671  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Hiram E.T. Connell  
Mailing Address 11 Garden St  
City Somersworth State NH Zip Code 03878-2516  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1200.00  
Date of Receipt MM / DD / YYYY  
06 / 10 / 2009  
**Transaction ID:** C5496701  
Amount of Each Receipt this Period 1200.00

**C.** Full Name (Last, First, Middle Initial)  
Jane A Nisbet  
Mailing Address 9 Woodside Rd  
City Durham State NH Zip Code 03824-2120  
FEC ID number of contributing federal political committee. **C**  
Name of Employer University of New Hampshire Occupation Professor  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt MM / DD / YYYY  
04 / 06 / 2009  
**Transaction ID:** C5508231  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2450.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kyle Nagel

Mailing Address 95 Gage Rd

City Bedford State NH Zip Code 03110-5618

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt 06 / 18 / 2009  
**Transaction ID:** C5508991  
 Amount of Each Receipt this Period 400.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Devens, III

Mailing Address 78 Maple St

City Center Sandwich State NH Zip Code 03227

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 18 / 2009  
**Transaction ID:** C5509071  
 Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
Michael A Simpson

Mailing Address 10 Somerset Pl

City Wilmington State MA Zip Code 01887

FEC ID number of contributing federal political committee. C

Name of Employer Bank of New York Mellon Occupation Accounting Manager

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 25 / 2009  
**Transaction ID:** C5510611  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 925.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
W. John Funk

Mailing Address PO Box 237

City State Zip Code  
Gilmanton NH 03237

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

Name of Employer Occupation  
Gallagher, Callahan & Gartell Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

**Transaction ID:** C5496692

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Karl Vrana

Mailing Address 8 Diniz Dr

City State Zip Code  
Raynham MA 02767

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

**Transaction ID:** C5508232

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Eric Nordgren

Mailing Address 6 Ryan Way

City State Zip Code  
Durham NH 03824

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

**Transaction ID:** C5496343

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Laurie C. Arbour

Mailing Address 5332 Crystyl Ranch Drive

City State Zip Code  
Concord CA 94521

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

Name of Employer Occupation  
Mt. Diablo Unified School Speech Pathologist

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2009

**Transaction ID:** C5515593

Amount of Each Receipt this Period  
400.00

700.00

**B.** Full Name (Last, First, Middle Initial)  
John F Maher

Mailing Address 8 Dunstable Rd

City State Zip Code  
Cambridge MA 02138

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 25 / 2009

**Transaction ID:** C5510613

Amount of Each Receipt this Period  
1000.00

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Allan Greenleaf

Mailing Address 116 Idlewood Road

City State Zip Code  
Rochester NY 14618

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

Name of Employer Occupation  
University of Rochester Professor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 29 / 2009

**Transaction ID:** C5511304

Amount of Each Receipt this Period  
250.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1650.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Karyn P Forbes

Mailing Address 12 Weeks Ln

City State Zip Code  
Barrington NH 03825

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

Name of Employer Occupation  
Shaheen & Gordon, P.A. Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 02 / 2009

**Transaction ID:** C5496664

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
James Donnell

Mailing Address 207 Norman Dr

City State Zip Code  
Cranberry Twp PA 16066-4233

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 08 / 2009

**Transaction ID:** C5496694

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
May Gruber

Mailing Address PO Box 353

City State Zip Code  
Manchester NH 03105

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

Name of Employer Occupation  
One Dow Corp, Inc President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2009

**Transaction ID:** C5496704

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Stephen H. Gorin

Mailing Address 4 Abby Drive

City State Zip Code  
Canterbury NH 03224

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

Name of Employer Occupation  
Plymouth State University Professor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2009

**Transaction ID:** C5511614

Amount of Each Receipt this Period  
25.00

275.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Devens, III

Mailing Address 78 Maple St

City State Zip Code  
Center Sandwich NH 03227

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 16 / 2009

**Transaction ID:** C5508084

Amount of Each Receipt this Period  
100.00

500.00

**C.** Full Name (Last, First, Middle Initial)  
Andrew Glashow

Mailing Address 115 Kane Ave

City State Zip Code  
Middletown RI 02842-5933

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 20 / 2009

**Transaction ID:** C5438484

Amount of Each Receipt this Period  
250.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Clay R Serenbetz

Mailing Address 6 Bay Road #20

City State Zip Code  
Newmarket NH 03857

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2009

**Transaction ID:** C5511645

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Elizabeth C. Janeway

Mailing Address 225 Tyler Rd

City State Zip Code  
Webster NH 03303-7733

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

Name of Employer Self Employed Occupation Painter

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 02 / 2009

**Transaction ID:** C5496665

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Woullard Lett

Mailing Address 354 E High St.

City State Zip Code  
Manchester NH 03104

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

Name of Employer So. New Hampshire University Occupation Administrator

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2009

**Transaction ID:** C5496705

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **901.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Dianne Thompson

Mailing Address 11 Marden Way

City State Zip Code  
Durham NH 03824

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 03 / 2009

**Transaction ID:** C5494625

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Jane S. Hoffman

Mailing Address 24 Harborview Drive

City State Zip Code  
Rye NH 03870

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 17 / 2009

**Transaction ID:** C5508265

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Kyle Nagel

Mailing Address 95 Gage Rd

City State Zip Code  
Bedford NH 03110-5618

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

Name of Employer Self Employed Occupation Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 18 / 2009

**Transaction ID:** C5509005

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1900.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Lawrence C Drake, Jr

Mailing Address 579 Sagamore Ave  
Unit 20

City Portsmouth State NH Zip Code 03801

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 28 / 2009  
**Transaction ID: C5515375**  
 Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Larry A Mayer

Mailing Address 20 Sawyer Rd

City Lee State NH Zip Code 03824-6433

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

Name of Employer University of New Hampshire Occupation Professor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 23 / 2009  
**Transaction ID: C5510585**  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Carole S. Appel

Mailing Address 16 Isaac Lucas Circle

City Dover State NH Zip Code 03820

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt 06 / 28 / 2009  
**Transaction ID: C5510945**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) James M Demers		Date of Receipt
	Mailing Address 24 Foxcross Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2009
	City	State	Zip Code
	Concord	NH	03301
	FEC ID number of contributing federal political committee.		Transaction ID: C5511856
	C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/>	
		250.00	
Name of Employer The Demers Group, Inc.		Occupation President	
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Woullard Lett		Date of Receipt
	Mailing Address 354 E High St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2009
	City	State	Zip Code
	Manchester	NH	03104
	FEC ID number of contributing federal political committee.		Transaction ID: C5511906
	C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/>	
		100.00	
Name of Employer So. New Hampshire University		Occupation Administrator	
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		201.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William E Christie		Date of Receipt
	Mailing Address 14 Princeton St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 02 / 2009
	City	State	Zip Code
	Concord	NH	03301
	FEC ID number of contributing federal political committee.		Transaction ID: C5496666
	C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/>	
		500.00	
Name of Employer Shaheen & Gordon, P.A.		Occupation Attorney	
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
James P Davis

Mailing Address 6 Lincoln Dr

City State Zip Code  
New Boston NH 03070

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

**Transaction ID:** C5496686

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Devens, III

Mailing Address 78 Maple St

City State Zip Code  
Center Sandwich NH 03227

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 9

**Transaction ID:** C5440576

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Laurie C. Arbour

Mailing Address 5332 Crystyl Ranch Drive

City State Zip Code  
Concord CA 94521

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Mt. Diablo Unified School Speech Pathologist

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C5429316

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... 900.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
D Edward Smyth

Mailing Address 134 Mt Mexico Rd

City State Zip Code  
Tamworth NH 03886

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

Name of Employer McGraw-Hill Companies      Occupation Executive VP Corp Affairs

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 28 / 2009  
**Transaction ID: C5515356**  
 Amount of Each Receipt this Period: 1400.00

Election Cycle-to-Date: 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Joan Jacobs

Mailing Address 579 Sagamore Ave #20

City State Zip Code  
Portsmouth NH 03801

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

Name of Employer N/A      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 28 / 2009  
**Transaction ID: C5515366**  
 Amount of Each Receipt this Period: 250.00

Election Cycle-to-Date: 750.00

**C.** Full Name (Last, First, Middle Initial)  
S Donald Sussman

Mailing Address 100 Sterling Rd

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Paloma Partners Management Company L.P.      Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 30 / 2009  
**Transaction ID: C5515616**  
 Amount of Each Receipt this Period: 2000.00

Election Cycle-to-Date: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Richard Devens, III

Mailing Address 78 Maple St

City State Zip Code  
Center Sandwich NH 03227

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5511847  
 Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Bradley A Naples

Mailing Address The Response Network, Inc.  
24 Hemlock Rd

City State Zip Code  
Hanover NH 03755

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt 06 / 02 / 2009  
**Transaction ID:** C5496667  
 Amount of Each Receipt this Period 500.00  
 See Refund 6/23/09

**C.** Full Name (Last, First, Middle Initial)  
Dale J Calegari

Mailing Address 117 North Rd

City State Zip Code  
Deerfield NH 03037

FEC ID number of contributing federal political committee. C

Name of Employer Barwind Home Improvement Occupation Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 02 / 2009  
**Transaction ID:** C5496687  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1025.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mary Breasted Smyth

Mailing Address 134 Mt Mexico Rd

City State Zip Code  
Tamworth NH 03886

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

Name of Employer Self Employed Occupation  
Self Employed Writer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 9

Transaction ID: C5440347

Amount of Each Receipt this Period  
1000.00

3800.00

**B.** Full Name (Last, First, Middle Initial)  
Paul J LeBlanc

Mailing Address 66 Highcrest Road

City State Zip Code  
Manchester NH 03104

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

Name of Employer Southern New Hampshire Un-iv Occupation  
Southern New Hampshire Un-iv President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 9

Transaction ID: C5486787

Amount of Each Receipt this Period  
500.00

750.00

**C.** Full Name (Last, First, Middle Initial)  
Helen Connell

Mailing Address 11 Garden St

City State Zip Code  
Somersworth NH 03878

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

Name of Employer N/A Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 9

Transaction ID: C5440427

Amount of Each Receipt this Period  
50.00

325.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Helen Connell

Mailing Address 11 Garden St

City Somersworth State NH Zip Code 03878

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 325.00

Date of Receipt: 06 / 18 / 2009  
**Transaction ID: C5509057**  
 Amount of Each Receipt this Period: 25.00

**B.**

Full Name (Last, First, Middle Initial)  
Sylvia Foster

Mailing Address 24 Woodridge Rd

City Durham State NH Zip Code 03824-2930

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

Name of Employer University of New Hampshire Occupation Educator

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 06 / 28 / 2009  
**Transaction ID: C5515367**  
 Amount of Each Receipt this Period: 100.00

**C.**

Full Name (Last, First, Middle Initial)  
David A Borden

Mailing Address PO Box 167  
40 Walbach St

City New Castle State NH Zip Code 03854-0167

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 06 / 28 / 2009  
**Transaction ID: C5515377**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **625.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rebel L Allard</p> <p>Mailing Address 4 Raven Terr</p> <p>City State Zip Code Londonderry NH 03053</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Severino Trucking Co., In- Construction c.</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 3 0 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C5515527</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Ellwood</p> <p>Mailing Address 233 Medford Leas</p> <p>City State Zip Code Medford NJ 08055-2239</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 2 7 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C5510917</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas Haas</p> <p>Mailing Address 583 Bay Road</p> <p>City State Zip Code Durham NH 03824</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Great Bay Aviation Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 0 7 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C5495388</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2700.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Wendy Gaal	Date of Receipt MM / DD / YYYY 06 / 09 / 2009
	Mailing Address 176 Eastern Promenade	<b>Transaction ID:</b> C5496408
	City Portland State ME Zip Code 04101	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer N/A Occupation Retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Gillett	Date of Receipt MM / DD / YYYY 06 / 02 / 2009
	Mailing Address 1258 Union St	<b>Transaction ID:</b> C5496688
	City Manchester State NH Zip Code 03104	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer RiverStone Resources LLC Occupation Executive Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Rebel L Allard	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 4 Raven Terr	<b>Transaction ID:</b> C5491648
	City Londonderry State NH Zip Code 03053	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Severino Trucking Co., In-c. Occupation Construction Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Barbara K Sweet

Mailing Address 50 Walbach Street  
Box 161

City State Zip Code  
New Castle NH 03854

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

Name of Employer Occupation  
Self Employed Camp Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 9

**Transaction ID:** C5510608

Amount of Each Receipt this Period  
250.00

750.00

**B.** Full Name (Last, First, Middle Initial)  
Bill Duncan

Mailing Address PO Box 760  
12 Cranfield St.

City State Zip Code  
New Castle NH 03854

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 7 / 2 0 0 9

**Transaction ID:** C5495389

Amount of Each Receipt this Period  
1000.00

1350.00

**C.** Full Name (Last, First, Middle Initial)  
James D Rosenberg

Mailing Address 31 Dunklee St

City State Zip Code  
Concord NH 03301

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

Name of Employer Occupation  
Shaheen and Associates Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

**Transaction ID:** C5496669

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
Phenton Harker

Mailing Address 1550 Union St

City State Zip Code  
Manchester NH 03104

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

Name of Employer Occupation  
Concord Hospital Family Doctor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**Transaction ID:** C5512049

Amount of Each Receipt this Period  
100.00

300.00

**B.** Full Name (Last, First, Middle Initial)  
Stephen Gaal

Mailing Address 176 Eastern Promenade

City State Zip Code  
Portland ME 04101

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	9

**Transaction ID:** C5496409

Amount of Each Receipt this Period  
1000.00

2000.00

**C.** Full Name (Last, First, Middle Initial)  
David A Goldman

Mailing Address 325 Pleasant St

City State Zip Code  
Concord NH 03301

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

Name of Employer Occupation  
Howe, Riley & Howe, PLLC CPA

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	2	/	2	0	0	9

**Transaction ID:** C5496659

Amount of Each Receipt this Period  
250.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
James F Powers

Mailing Address 3 Curriers Cove

City Portsmouth State NH Zip Code 03801

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 12 / 2009  
**Transaction ID:** C5507629

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Phillippe Villers

Mailing Address 20 Whits End Rd

City Concord State MA Zip Code 01742-5411

FEC ID number of contributing federal political committee. C

Name of Employer Families USA Foundation Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 25 / 2009  
**Transaction ID:** C5510609

Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Woody Kaplan

Mailing Address 2 Commonwealth Ave Apt 14A

City Boston State MA Zip Code 02116-3158

FEC ID number of contributing federal political committee. C

Name of Employer The Kaplan Group, Inc Occupation Provocateur

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 25 / 2009  
**Transaction ID:** C5515617A

Amount of Each Receipt this Period 1000.00

\* Earmarked Contribution:  
See Below

**SUBTOTAL** of Receipts This Page (optional) ..... 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) CIVIL LIBERTIES LIST		Date of Receipt																				
	Mailing Address 6849 Old Dominion Drive Suite 222		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	6		3	0		2	0	0	9													
	City	State	Zip Code																				
McLean	VA	22101																					
FEC ID number of contributing federal political committee.	<b>C</b> C00346098		<b>Transaction ID:</b> C5515617AB																				
Name of Employer	Occupation	Amount of Each Receipt this Period																					
	Conduit total listed in Agg. field	<table border="1"><tr><td>1000.00</td></tr></table>		1000.00																			
1000.00																							
Receipt For: 2010	Election Cycle-to-Date ▼	[MEMO ITEM]																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Note: Above Contribution earmarked through this organization.																					
<input type="checkbox"/> Other (specify) ▼	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																					
1000.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>33601.00</td></tr></table>	33601.00
33601.00		

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
196.93

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C5438471

Amount of Each Receipt this Period  
175.35

\* In-Kind: Fundraising Event Costs

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
196.93

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C5438472

Amount of Each Receipt this Period  
21.58

\* In-Kind: Fundraising Event Costs

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	196.93
<b>TOTAL</b> This Period (last page this line number only) .....	▶	196.93

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
CWA - COPE PCC

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 06 / 13 / 2009  
**Transaction ID:** C5508080  
Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
AMALGAMATED TRANSIT UNION-COPE

Mailing Address 5025 WISCONSIN AVE NW

City WASHINGTON State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 30 / 2009  
**Transaction ID:** C5515530  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
NANCY PELOSI FOR CONGRESS

Mailing Address 607 14th Street, NW Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00213512

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 06 / 30 / 2009  
**Transaction ID:** C5515540  
Amount of Each Receipt this Period: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
LABORERS' POLITICAL LEAGUE-LIUNA

Mailing Address 905 16th St NW  
Second Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5515550  
 Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
BETTY PAC

Mailing Address PO BOX 14141

City ST PAUL State MN Zip Code 55114

FEC ID number of contributing federal political committee. **C** C00405050

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5515590  
 Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Newbury Democratic Town Committee

Mailing Address 5 Hanover Dr

City Newbury State MA Zip Code 01951-1104

FEC ID number of contributing federal political committee. **C** C00456731

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 75.00

Date of Receipt 06 / 16 / 2009  
**Transaction ID:** C5510570  
 Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3575.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

City Toledo State OH Zip Code 43697

FEC ID number of contributing federal political committee. **C** C00154625

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 25 / 2009  
**Transaction ID: C5515491**  
 Amount of Each Receipt this Period: 2000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 499 S. CAPITOL ST. S.W.  
Ste 414

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 06 / 25 / 2009  
**Transaction ID: C5515411**  
 Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

FEC ID number of contributing federal political committee. **C** C00013128

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 30 / 2009  
**Transaction ID: C5515521**  
 Amount of Each Receipt this Period: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 70
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) INTL. UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS		Date of Receipt
	Mailing Address 620 F Street, NW Suite 900		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20004
	FEC ID number of contributing federal political committee.		Transaction ID: C5496632
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) AMERICAN FED OF TEACHERS AFL-CIO COPE		Date of Receipt
	Mailing Address 555 New Jersey Avenue NW		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20001
	FEC ID number of contributing federal political committee.		Transaction ID: C5515492
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="5000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) SOLIDARITY PAC		Date of Receipt
	Mailing Address 607 14th Street N.W. Suite 800		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee.		Transaction ID: C5515493
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="5000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="11000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 34 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
PAC TO THE FUTURE

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00344234

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5515533  
 Amount of Each Receipt this Period 3000.00

**B.** Full Name (Last, First, Middle Initial)  
INT'L B'HOOD OF BOILERMAKERS-BLACKSMITHS C.A.F.

Mailing Address 753 State Ave  
Suite 565

City Kansas City State KS Zip Code 66101

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5515553  
 Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
VICTORY NOW PAC

Mailing Address 10605 Concord Street  
Ste 202

City Kensington State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C** C00416743

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 06 / 30 / 2009  
**Transaction ID:** C5515614  
 Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
AMER POSTAL WORKERS UNION COPA  
Mailing Address 1300 L Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
06 / 25 / 2009

**Transaction ID:** C5510614

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
NIKI TSONGAS COMMITTEE, THE  
Mailing Address PO Box 1454

City Lowell State MA Zip Code 01853

FEC ID number of contributing federal political committee. **C** C00433136

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
06 / 30 / 2009

**Transaction ID:** C5515615

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
LEADERSHIP THAT LISTENS PAC  
Mailing Address PO BOX 44084

City FORT WASHINGTON State MD Zip Code 20749

FEC ID number of contributing federal political committee. **C** C00456905

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
06 / 25 / 2009

**Transaction ID:** C5515485

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
WOOLSEY FOR CONGRESS  
Mailing Address P.O. Box 750176

City State Zip Code  
Petaluma CA 94975

FEC ID number of contributing federal political committee. **C** C00260265

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 9  
**Transaction ID:** C5515525  
 Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
LARSON FOR CONGRESS  
Mailing Address P.O. Box 261172

City State Zip Code  
Hartford CT 06126

FEC ID number of contributing federal political committee. **C** C00330142

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 9  
**Transaction ID:** C5515605  
 Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
AFL-CIO COPE PCC  
Mailing Address 815 16th St NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00003806

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 9  
**Transaction ID:** C5515625  
 Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW  
8th Floor

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 9

**Transaction ID:** C5510615

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 Rhode Island Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 9

**Transaction ID:** C5515396

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JIM CLYBURN

Mailing Address PO Box 12567

City State Zip Code  
Columbia SC 29211

FEC ID number of contributing federal political committee. **C** C00255562

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 9

**Transaction ID:** C5515486

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
LARSON FOR CONGRESS

Mailing Address P.O. Box 261172

City State Zip Code  
Hartford CT 06126

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2009

Transaction ID: C5515606

FEC ID number of contributing federal political committee. **C** C00330142

Amount of Each Receipt this Period  
1000.00

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
PERLMUTTER FOR CONGRESS

Mailing Address 3440 Youngfield St #264

City State Zip Code  
Wheat Ridge CO 80033

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2009

Transaction ID: C5515626

FEC ID number of contributing federal political committee. **C** C00410639

Amount of Each Receipt this Period  
1000.00

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
AFSCME AFL-CIO

Mailing Address 1625 L STREET NW

City State Zip Code  
WASHINGTON DC 20036

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2009

Transaction ID: C5510616

FEC ID number of contributing federal political committee. **C** C00011114

Amount of Each Receipt this Period  
4000.00

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

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

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

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

FOR LINE NUMBER: PAGE 39 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
WE THE PEOPLE PAC  
Mailing Address PO BOX 2232  
City State Zip Code  
Jenkintown PA 19046  
FEC ID number of contributing federal political committee. **C** C00438721  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 9  
Transaction ID: C5515487  
Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF ROSA DELAURO  
Mailing Address 12 TRUMBULL ST  
City State Zip Code  
NEW HAVEN CT 06511  
FEC ID number of contributing federal political committee. **C** C00238865  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9  
Transaction ID: C5515607  
Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
DIANA DEGETTE FOR CONGRESS INC.  
Mailing Address P.O. Box 61337  
City State Zip Code  
Denver CO 80206  
FEC ID number of contributing federal political committee. **C** C00311639  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9  
Transaction ID: C5515627  
Amount of Each Receipt this Period  
1000.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
BRIDGE PAC

Mailing Address 499 SOUTH CAPITOL ST SW  
STE 412

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00399196

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 9

**Transaction ID:** C5515488

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
INT'L ASSOC OF FIREFIGHTERS PAC

Mailing Address 1750 New York Ave NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

**Transaction ID:** C5515538

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAUD FOR CONGRESS

Mailing Address 213 Lisbon St

City State Zip Code  
Lewiston ME 04240

FEC ID number of contributing federal political committee. **C** C00367821

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

**Transaction ID:** C5515532

Amount of Each Receipt this Period  
2000.00

\* Earmarked Contribution:  
See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9500.00**

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

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

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

FOR LINE NUMBER: PAGE 41 / 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**Transaction ID:** C5515532B

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATS WIN SEATS (DWS PAC)

Mailing Address 1071 TWIN BRANCH LN

City State Zip Code  
WESTON FL 33326

FEC ID number of contributing federal political committee. **C** C00425470

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**Transaction ID:** C5515523

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**Transaction ID:** C5515523B

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ► 68575.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 15463</p> <p>City Wilmington State DE Zip Code 19884-5463</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D307660 <b>Date of Disbursement</b> 06 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 57.40</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paper Trails</p> <p>Mailing Address 12 Federal St</p> <p>City Brunswick State ME Zip Code 04011</p> <p>Purpose of Disbursement Payroll Service Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D308410 <b>Date of Disbursement</b> 05 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 11.30</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Combined Services, LLC</p> <p>Mailing Address 15 North Main St Suite 300</p> <p>City Concord State NH Zip Code 03301-4945</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 State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298210 <b>Date of Disbursement</b> 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 254.56</p>

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

323.26

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Kari Thurman  Mailing Address 96 Brook St.  City Manchester State NH Zip Code 03104  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D298450 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 1429.92
B.	Full Name (Last, First, Middle Initial) Paper Trails  Mailing Address 12 Federal St.  City Brunswick State ME Zip Code 04011  Purpose of Disbursement Payroll Service Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D304060 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 9  Amount of Each Disbursement this Period 18.00
C.	Full Name (Last, First, Middle Initial) NGP Software, Inc.  Mailing Address 1225 Eye Street NW Suite 1225  City Washington State DC Zip Code 20005  Purpose of Disbursement Software Support Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D298740 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period 55.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1502.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Paper Trails	Transaction ID: D304930 Date of Disbursement 06 / 05 / 2009
	Mailing Address 12 Federal St	Amount of Each Disbursement this Period 18.00
	City Brunswick State ME Zip Code 04011	
	Purpose of Disbursement Payroll Service Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Intuit	Transaction ID: D304940 Date of Disbursement 05 / 06 / 2009
	Mailing Address 2632 Marine Way	Amount of Each Disbursement this Period 34.95
	City Mountain View State CA Zip Code 94043	
	Purpose of Disbursement Software Support Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) First Data Corporation	Transaction ID: D304970 Date of Disbursement 06 / 03 / 2009
	Mailing Address 6200 South Quebec St	Amount of Each Disbursement this Period 9.80
	City Greenwood Village State CO Zip Code 80111	
	Purpose of Disbursement Credit Card Processing Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>62.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) National Democratic Club	Transaction ID: D305180 Date of Disbursement MM / DD / YYYY 06 / 04 / 2009
	Mailing Address 30 Ivy St SE	Amount of Each Disbursement this Period 40.00
	City Washington State DC Zip Code 20003-4006	
	Purpose of Disbursement Meals and Catering	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Shirley Sauvageau	Transaction ID: D298211 Date of Disbursement MM / DD / YYYY 04 / 08 / 2009
	Mailing Address 149 Stage Road	Amount of Each Disbursement this Period 500.00
	City Nottingham State NH Zip Code 03290	
	Purpose of Disbursement Database Support Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Auburn Quad	Transaction ID: D306861 Date of Disbursement MM / DD / YYYY 06 / 30 / 2009
	Mailing Address PO Box 390728	Amount of Each Disbursement this Period 2.18
	City Cambridge State MA Zip Code 02139-0008	
	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	542.18
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Barking Crab	Transaction ID: D304941
	Mailing Address 88 Sleeper St	Date of Disbursement 05 / 27 / 2009
	City Boston State MA Zip Code 02210	Amount of Each Disbursement this Period 259.00
	Purpose of Disbursement Meals	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: D305161
	Mailing Address 20 Allen St	Date of Disbursement 06 / 23 / 2009
	City Rochester State NH Zip Code 03867-1401	Amount of Each Disbursement this Period 88.00
	Purpose of Disbursement Postage	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Marriott	Transaction ID: D308411
	Mailing Address Box 860 588 Wentworth Rd	Date of Disbursement 05 / 27 / 2009
	City New Castle State NH Zip Code 03854	Amount of Each Disbursement this Period 135.89
	Purpose of Disbursement Lodging	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>482.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paper Trails</p> <p>Mailing Address 12 Federal St</p> <p>City Brunswick State ME Zip Code 04011</p> <p>Purpose of Disbursement Payroll Taxes</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298451 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 557.46</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ellen Fleming</p> <p>Mailing Address 11 Cass St</p> <p>City Exeter State NH Zip Code 03833</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 State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304061 <b>Date of Disbursement</b> 05 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1138.27</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) New Hampshire Democratic Party</p> <p>Mailing Address 2 1/2 Beacon St. Concord</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name New Hampshire Democratic Party</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304971 <b>Date of Disbursement</b> 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

2695.73

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Bullfeathers of Capitol Hill  Mailing Address 410 1st St SE  City Washington State DC Zip Code 20003  Purpose of Disbursement Catering for Campaign Event Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D306952 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 463.40
<b>B.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address PO Box 15463  City Wilmington State DE Zip Code 19884-5463  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D307662 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 9  Amount of Each Disbursement this Period 70.96
<b>C.</b>	Full Name (Last, First, Middle Initial) Kari Thurman  Mailing Address 96 Brook St.  City Manchester State NH Zip Code 03104  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D298212 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9  Amount of Each Disbursement this Period 1429.92

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1964.28
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Paper Trails	Transaction ID: D298452 Date of Disbursement
	Mailing Address 12 Federal St	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Brunswick State ME Zip Code 04011	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Fees	<input type="text" value="18.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: D304052 Date of Disbursement
	Mailing Address 1831 Bay Street, SE	<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting Services	<input type="text" value="188.47"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D304062 Date of Disbursement
	Mailing Address PO Box 15463	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Wilmington State DE Zip Code 19884-5463	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees	<input type="text" value="70.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="277.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Auburn Quad  Mailing Address PO Box 390728  City Cambridge State MA Zip Code 02139-0008  Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D304082 Date of Disbursement 05 / 27 / 2009  Amount of Each Disbursement this Period 1.98
B.	Full Name (Last, First, Middle Initial) Marriott  Mailing Address Box 860 588 Wentworth Rd  City New Castle State NH Zip Code 03854  Purpose of Disbursement Lodging Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D304942 Date of Disbursement 05 / 29 / 2009  Amount of Each Disbursement this Period 287.77
C.	Full Name (Last, First, Middle Initial) New Hampshire Democratic Party  Mailing Address 2 1/2 Beacon St. Concord  City Concord State NH Zip Code 03301  Purpose of Disbursement Gifts for Supporters Candidate Name New Hampshire Democratic Party  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D304972 Date of Disbursement 06 / 04 / 2009  Amount of Each Disbursement this Period 1000.00

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

1289.75

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service  Mailing Address 20 Allen St  City Rochester State NH Zip Code 03867-1401  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D306953 Date of Disbursement 06 / 26 / 2009  Amount of Each Disbursement this Period 88.00
B.	Full Name (Last, First, Middle Initial) Paper Trails  Mailing Address 12 Federal St  City Brunswick State ME Zip Code 04011  Purpose of Disbursement Payroll Taxes Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D298213 Date of Disbursement 04 / 10 / 2009  Amount of Each Disbursement this Period 557.46
C.	Full Name (Last, First, Middle Initial) Shirley Sauvageau  Mailing Address 149 Stage Road  City Nottingham State NH Zip Code 03290  Purpose of Disbursement Database Support Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D304053 Date of Disbursement 05 / 11 / 2009  Amount of Each Disbursement this Period 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1145.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address PO Box 15463  City Wilmington State DE Zip Code 19884-5463  Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D304063 Date of Disbursement 04 / 01 / 2009  Amount of Each Disbursement this Period 57.40  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Intuit  Mailing Address 2632 Marine Way  City Mountain View State CA Zip Code 94043  Purpose of Disbursement Software Support Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D304943 Date of Disbursement 06 / 11 / 2009  Amount of Each Disbursement this Period 34.95  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Southwest Airlines  Mailing Address P.O. Box 36647 - 1CR  City Dallas State TX Zip Code 75235  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D306954 Date of Disbursement 06 / 29 / 2009  Amount of Each Disbursement this Period 45.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>137.35</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 15463</p> <p>City Wilmington State DE Zip Code 19884-5463</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D307664</p> <p>Date of Disbursement 05 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 57.40</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paper Trails</p> <p>Mailing Address 12 Federal St</p> <p>City Brunswick State ME Zip Code 04011</p> <p>Purpose of Disbursement Payroll Service Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298214</p> <p>Date of Disbursement 04 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 53.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304054</p> <p>Date of Disbursement 05 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 7.01</p>

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

117.41

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address 497 High St</p> <p>City Somersworth State NH Zip Code 03878</p> <p>Purpose of Disbursement Telecommunications Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D304964</p> <p>Date of Disbursement 06 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 596.79</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paper Trails</p> <p>Mailing Address 12 Federal St</p> <p>City Brunswick State ME Zip Code 04011</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D306955</p> <p>Date of Disbursement 06 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 432.42</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Liberty Concepts</p> <p>Mailing Address Suite 211 119 Braintree St</p> <p>City Allston State MA Zip Code 02134</p> <p>Purpose of Disbursement Website Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D304055</p> <p>Date of Disbursement 05 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p>

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

1429.21

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) First Data Corporation</p> <p>Mailing Address 6200 South Quebec St</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304065</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 97.52</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304625</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 0.99</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) First Data Corporation</p> <p>Mailing Address 6200 South Quebec St</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304935</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 203.00</p>

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

301.51

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Shirley Sauvageau <hr/> Mailing Address 149 Stage Road <hr/> City Nottingham State NH Zip Code 03290 <hr/> Purpose of Disbursement Database Support Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D304945 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Southwest Airlines <hr/> Mailing Address P.O. Box 36647 - 1CR <hr/> City Dallas State TX Zip Code 75235 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D304965 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 183.20
<b>C.</b>	Full Name (Last, First, Middle Initial) Paper Trails <hr/> Mailing Address 12 Federal St <hr/> City Brunswick State ME Zip Code 04011 <hr/> Purpose of Disbursement Payroll Service Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D306956 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 18.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	701.20
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Kari Thurman  Mailing Address 96 Brook St.  City Manchester State NH Zip Code 03104  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D304056 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9  Amount of Each Disbursement this Period 1429.92
<b>B.</b>	Full Name (Last, First, Middle Initial) National Democratic Club  Mailing Address 30 Ivy St SE  City Washington State DC Zip Code 20003-4006  Purpose of Disbursement Meals and Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D304066 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9  Amount of Each Disbursement this Period 40.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Auburn Quad  Mailing Address PO Box 390728  City Cambridge State MA Zip Code 02139-0008  Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D304626 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 9  Amount of Each Disbursement this Period 0.99

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1470.91
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) First Data Corporation</p> <p>Mailing Address 6200 South Quebec St</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304936</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 11.29</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Evans &amp; Katz LLC</p> <p>Mailing Address 1831 Bay Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Accounting 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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304946</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 556.86</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ellen Fleming</p> <p>Mailing Address 11 Cass St</p> <p>City Exeter State NH Zip Code 03833</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 State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D306957</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1156.84</p>

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

1724.99

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304627</p> <p>Date of Disbursement MM / DD / YYYY 06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 0.99</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Liberty Concepts</p> <p>Mailing Address Suite 211 119 Braintree St</p> <p>City Allston State MA Zip Code 02134</p> <p>Purpose of Disbursement Website 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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298207</p> <p>Date of Disbursement MM / DD / YYYY 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Intuit</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Software Support 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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298257</p> <p>Date of Disbursement MM / DD / YYYY 04 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 34.95</p>

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

**435.94**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Auburn Quad Mailing Address PO Box 390728 City Cambridge State MA Zip Code 02139-0008 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D298447 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9 Amount of Each Disbursement this Period 0.99 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Paper Trails Mailing Address 12 Federal St City Brunswick State ME Zip Code 04011 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D304057 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9 Amount of Each Disbursement this Period 637.45 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T Mailing Address 497 High St City Somersworth State NH Zip Code 03878 Purpose of Disbursement Telecommunications Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D304067 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9 Amount of Each Disbursement this Period 794.71 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1433.15

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

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

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Auburn Quad	Transaction ID: D298737 Date of Disbursement																			
	Mailing Address PO Box 390728	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	4		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	4		2	0	9													
	City Cambridge State MA Zip Code 02139-0008	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Processing Fees	<table border="1"><tr><td>0.99</td></tr></table>	0.99																		
0.99																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Auburn Quad	Transaction ID: D298757 Date of Disbursement																			
	Mailing Address PO Box 390728	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	7		2	0	9													
	City Cambridge State MA Zip Code 02139-0008	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Processing Fees	<table border="1"><tr><td>0.99</td></tr></table>	0.99																		
0.99																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) First Data Corporation	Transaction ID: D304937 Date of Disbursement																			
	Mailing Address 6200 South Quebec St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	5		2	0	9													
	City Greenwood Village State CO Zip Code 80111	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Processing Fees	<table border="1"><tr><td>10.60</td></tr></table>	10.60																		
10.60																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>12.58</td></tr></table>	12.58
12.58		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Accurate Word, LLC</p> <p>Mailing Address 4481 White Plains Ln</p> <p>City White Plains State MD Zip Code 20695</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304947</p> <p>Date of Disbursement MM / DD / YYYY 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 1082.30</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address 497 High St</p> <p>City Somersworth State NH Zip Code 03878</p> <p>Purpose of Disbursement Telecommunications Equipment</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304967</p> <p>Date of Disbursement MM / DD / YYYY 06 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 99.99</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D305177</p> <p>Date of Disbursement MM / DD / YYYY 06 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 4.36</p>

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

**1186.65**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Evans &amp; Katz LLC</p> <p>Mailing Address 1831 Bay Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D298208</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2247.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paper Trails</p> <p>Mailing Address 12 Federal St</p> <p>City Brunswick State ME Zip Code 04011</p> <p>Purpose of Disbursement Payroll Service Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D304058</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) First Data Corporation</p> <p>Mailing Address 6200 South Quebec St</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D304068</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="167.59"/></p>

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.

Full Name (Last, First, Middle Initial)  
Ellen Fleming

Transaction ID: D304928  
Date of Disbursement

Mailing Address 11 Cass St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City Exeter State NH Zip Code 03833

Amount of Each Disbursement this Period

1175.41
---------

Purpose of Disbursement  
Salary

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
AT&T

Transaction ID: D304938  
Date of Disbursement

Mailing Address 497 High St

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	9

City Somersworth State NH Zip Code 03878

Amount of Each Disbursement this Period

788.40
--------

Purpose of Disbursement  
Telecommunications Services

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
First Data Corporation

Transaction ID: D304968  
Date of Disbursement

Mailing Address 6200 South Quebec St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	9

City Greenwood Village State CO Zip Code 80111

Amount of Each Disbursement this Period

60.40
-------

Purpose of Disbursement  
Credit Card Processing Fees

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2024.21
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Shirley Sauvageau  Mailing Address 149 Stage Road  City Nottingham State NH Zip Code 03290  Purpose of Disbursement Database Support Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D305158 Date of Disbursement 06 / 22 / 2009  Amount of Each Disbursement this Period 500.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Auburn Quad  Mailing Address PO Box 390728  City Cambridge State MA Zip Code 02139-0008  Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D305178 Date of Disbursement 06 / 25 / 2009  Amount of Each Disbursement this Period 4.16  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Auburn Quad  Mailing Address PO Box 390728  City Cambridge State MA Zip Code 02139-0008  Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D306959 Date of Disbursement 06 / 30 / 2009  Amount of Each Disbursement this Period 4.55  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	508.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address PO Box 15463  City Wilmington State DE Zip Code 19884-5463  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D307659 Date of Disbursement 05 / 15 / 2009  Amount of Each Disbursement this Period 70.96
B.	Full Name (Last, First, Middle Initial) NGP Software, Inc.  Mailing Address 1225 Eye Street NW Suite 1225  City Washington State DC Zip Code 20005  Purpose of Disbursement Software Support Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D298209 Date of Disbursement 04 / 08 / 2009  Amount of Each Disbursement this Period 2247.00
C.	Full Name (Last, First, Middle Initial) Paper Trails  Mailing Address 12 Federal St  City Brunswick State ME Zip Code 04011  Purpose of Disbursement Payroll Taxes Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D304059 Date of Disbursement 05 / 22 / 2009  Amount of Each Disbursement this Period 420.21

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

2738.17

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 70

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) First Data Corporation</p> <p>Mailing Address 6200 South Quebec St</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304069</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 19.90</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paper Trails</p> <p>Mailing Address 12 Federal St</p> <p>City Brunswick State ME Zip Code 04011</p> <p>Purpose of Disbursement Payroll Taxes</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304929</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 455.93</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy St SE</p> <p>City Washington State DC Zip Code 20003-4006</p> <p>Purpose of Disbursement Meals and Catering</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D304939</p> <p>Date of Disbursement 05 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 40.00</p>

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

515.83

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.

Full Name (Last, First, Middle Initial)  
First Data Corporation

Mailing Address 6200 South Quebec St

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D304969  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	9

Amount of Each Disbursement this Period

19.98
-------

B.

Full Name (Last, First, Middle Initial)  
U.S. Postal Service

Mailing Address 20 Allen St

City Rochester State NH Zip Code 03867-1401

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D305159  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

Amount of Each Disbursement this Period

1056.00
---------

C.

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 45 Gosling Rd

City Newington State NH Zip Code 03801-2835

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D305179  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	9

Amount of Each Disbursement this Period

36.99
-------

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

1112.97

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) CAROL SHEA-PORTER	Transaction ID: D298739 Date of Disbursement 04 / 28 / 2009
	Mailing Address PO Box 453	Amount of Each Disbursement this Period 280.00
	City Rochester State NH Zip Code 03866-0453	
	Purpose of Disbursement Reimb.- Lodging	Category/Type
	Candidate Name Ms Carol Shea-Porter	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Sheraton Hotels & Resorts	Transaction ID: D308556 Date of Disbursement 04 / 28 / 2009
	Mailing Address 1111 Westchester Ave	Amount of Each Disbursement this Period 280.00
	City White Plains State NY Zip Code 10604	
	Purpose of Disbursement Lodging	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

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

280.00

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

28850.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Carol Shea-Porter for Congress

A.	Full Name (Last, First, Middle Initial) Bradley A Naples		Transaction ID: D305160	
	Mailing Address The Response Network, Inc. 24 Hemlock Rd		Date of Disbursement MM / DD / YYYY 06 / 23 / 2009	
	City Hanover	State NH	Zip Code 03755	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Refund of Contribution 6/2/2009		Category/ Type	Refund
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

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

500.00

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

500.00