

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than 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 MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

ADDRESS (number and street) 56 ROLAND ST NORTH LOBBY #203 BOSTON MA 02129 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00089243 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 05 01 2007 through 05 31 2007

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 ERIC TURNER

Signature of Treasurer Electronically Filed by ERIC TURNER Date 01 31 2008

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

Table with 8 columns and 1 row. Column 1: Office Use Only. Column 2-8: Empty. Column 9: FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		104639.75
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	77137.83									
(c) Total Receipts (from Line 19) .....	103810.58	351391.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	180948.41	456031.17								
7. Total Disbursements (from Line 31) .....	78421.94	353504.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	102526.47	102526.47								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	4687.40									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	1662.20									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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**

Write or Type Committee Name  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	38651.00	99385.71
(i) Itemized (use Schedule A) .....	23295.00	173604.01
(ii) Unitemized .....	61946.00	272989.72
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	32125.00	59450.00
(c) Other Political Committees (such as PACs) .....	94071.00	332439.72
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	6187.50	8074.67
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	3552.08	7127.03
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	3750.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	103810.58	351391.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	103810.58	351391.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	10986.73	64596.01
(ii) Non-Federal Share.....	18796.46	103354.79
(b) Other Federal Operating Expenditures.....	51.00	8034.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	29834.19	175985.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	825.00	1375.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	20500.00	20500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	21325.00	21875.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	27262.75	155644.46
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	27262.75	155644.46
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	78421.94	353504.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59625.48	250149.91

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	94071.00	332439.72
34. Total Contribution Refunds (from Line 28(d)) .....	21325.00	21875.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	72746.00	310564.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11037.73	72630.45
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	3552.08	7127.03
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7485.65	65503.42

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 64  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
Virginia Allan

Mailing Address 36 Hesseltine Ave

City State Zip Code  
Melrose MA 02176

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

Name of Employer Self-Employed  
Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2007

Transaction ID: SA11AI.58826

Amount of Each Receipt this Period  
1200.00

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL ANGELINI

Mailing Address 16 Military Rd

City State Zip Code  
Worcester MA 01609-1627

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

Name of Employer Bowditch & Dewey  
Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: SA11AI.58829

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
PETER ASIAF, JR

Mailing Address 26 Nylan Rd

City State Zip Code  
Brockton MA 02301

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: SA11AI.58837

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1950.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
SUZANNE BROCKMANN-GAFFNEY

Mailing Address 374 Lexington St

City State Zip Code  
Waltham MA 02452

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

Name of Employer Self-Employed Occupation  
Self-Employed Writer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.58855

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
ELLEN BROWN

Mailing Address 1395 Commonwealth Ave

City State Zip Code  
Newton MA 02465

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

Name of Employer AOTL Occupation  
AOTL Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.58857

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
GALE CANDARAS

Mailing Address 643 TINKHAM RD

City State Zip Code  
WILBRAHAM MA 01095

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

Name of Employer Commonwealth of Massachusetts Occupation  
STATE REPRESENTATIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.58863

Amount of Each Receipt this Period

500.00

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
**ANA CECCHIN**  
 Mailing Address **63 MOSSDALE RD**  
 City **BOSTON** State **MA** Zip Code **02130-3022**  
 Date of Receipt **05 / 07 / 2007**  
**Transaction ID: SA11AI.58866**  
 Amount of Each Receipt this Period **75.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **SELF** Occupation **EDITOR**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **475.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN CHESSARE**  
 Mailing Address **6 Stone Crossing Way**  
 City **Hopkinton** State **MA** Zip Code **01748**  
 Date of Receipt **05 / 04 / 2007**  
**Transaction ID: SA11AI.58869**  
 Amount of Each Receipt this Period **250.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **BMC** Occupation **Senior Vice President**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

**C.** Full Name (Last, First, Middle Initial)  
**JEANETTE CLOUGH**  
 Mailing Address **20 OLDE TOWNE RD**  
 City **LYNNFIELD** State **MA** Zip Code **01940**  
 Date of Receipt **05 / 04 / 2007**  
**Transaction ID: SA11AI.58874**  
 Amount of Each Receipt this Period **250.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Mt Auburn Hospital** Occupation **Exec Director**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
DONNA CORBETT

Mailing Address 11 MARK AVE

City State Zip Code  
READING MA 01867-1556

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

Name of Employer Occupation  
RSCR ASSOCIATES CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.58878

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
JOHN CORRIGAN

Mailing Address 210 Rangeley Rd

City State Zip Code  
Brookline MA 02467

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

Name of Employer Occupation  
Corrigan & Levy Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.58880

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
CHERYL CRONIN

Mailing Address 419 BEACON ST

City State Zip Code  
BOSTON MA 02115-1101

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

Name of Employer Occupation  
BROWN RUDNICK ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.58886

Amount of Each Receipt this Period

1000.00

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

1800.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 64  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**NADER DAREHSHORI**

Mailing Address **44 CARISBROOKE RD**

City **WELLESLEY** State **MA** Zip Code **02481**

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

Name of Employer **CAMBIUM LEARNING** Occupation **CHAIRMAN AND CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **05 / 01 / 2007**

**Transaction ID: SA11AI.58893**

Amount of Each Receipt this Period **1000.00**

**B.**

Full Name (Last, First, Middle Initial)  
**BARBARA DENUCCI**

Mailing Address **119 Warwick Rd**

City **Newton** State **MA** Zip Code **02465**

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

Name of Employer **At home** Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 04 / 2007**

**Transaction ID: SA11AI.58895**

Amount of Each Receipt this Period **250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MARK DISALVO**

Mailing Address **1011 Great Pond Rd**

City **North Andover** State **MA** Zip Code **01845-1205**

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

Name of Employer **Semophone** Occupation **CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 04 / 2007**

**Transaction ID: SA11AI.58898**

Amount of Each Receipt this Period **400.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN DONOHUE		Date of Receipt																					
	Mailing Address 40 GODEN 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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	4		2	0	0	7														
	City State Zip Code BELMONT MA 02478		<b>Transaction ID:</b> SA11AI.58902																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00																						
Name of Employer Arbella Insurance		Occupation Attorney																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) PAUL DONOVAN		Date of Receipt																					
	Mailing Address 82 PARK AVE		<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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	4		2	0	0	7														
	City State Zip Code NEWTON MA 02458		<b>Transaction ID:</b> SA11AI.58903																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 417.00																						
Name of Employer KEARNEY DONOVAN & MCGEE		Occupation ATTORNEY																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 417.00																						

<b>C.</b>	Full Name (Last, First, Middle Initial) TERENCE DOUGHERTY		Date of Receipt																					
	Mailing Address 57 Dent 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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	5		2	0	0	7														
	City State Zip Code Boston MA 02132		<b>Transaction ID:</b> SA11AI.58905																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00																						
Name of Employer Caritas Christi Health Care		Occupation Senior VP																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3167.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) NAZLI ERBAY		Date of Receipt																					
	Mailing Address 151 TREMONT ST 27D		<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>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	7		2	0	0	7														
	City State Zip Code BOSTON MA 02111		<b>Transaction ID:</b> SA11AI.58910																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00																						
Name of Employer Occupation LAHEY CLINIC PHYSICIAN		Aggregate Year-to-Date ▼ 275.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>B.</b>	Full Name (Last, First, Middle Initial) JULIE ERWIN		Date of Receipt																					
	Mailing Address 40 Bullard 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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	4		2	0	0	7														
	City State Zip Code Walpole MA 02081		<b>Transaction ID:</b> SA11AI.58912																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00																						
Name of Employer Occupation Conference of Teaching Hospitals Executive Directors		Aggregate Year-to-Date ▼ 250.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>C.</b>	Full Name (Last, First, Middle Initial) HERIBERTO FLORES		Date of Receipt																					
	Mailing Address 833 CHESTNUT 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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	4		2	0	0	7														
	City State Zip Code SPRINGFIELD MA 01107		<b>Transaction ID:</b> SA11AI.58920																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00																						
Name of Employer Occupation NE FARMWORKERS COUNCIL EXECUTIVE DIRECTOR		Aggregate Year-to-Date ▼ 300.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	525.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
 Timothy Gens  
 Mailing Address 802 BOSTON POST RD  
 City WESTON State MA Zip Code 02493-1183  
 Date of Receipt 05 / 04 / 2007  
 Transaction ID: SA11AI.58928  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer MHA Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 250.00

**B.** Full Name (Last, First, Middle Initial)  
 Margaret Gibbons  
 Mailing Address 5 Lakeside Terrace  
 City Westford State MA Zip Code 01886  
 Date of Receipt 05 / 04 / 2007  
 Transaction ID: SA11AI.58929  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer homemaker Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 250.00

**C.** Full Name (Last, First, Middle Initial)  
 CHARLES GLICK  
 Mailing Address 8 Winter Street 12th Floor  
 City Boston State MA Zip Code 02108  
 Date of Receipt 05 / 04 / 2007  
 Transaction ID: SA11AI.59383  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer CHARLES GROUP CONSULTING Occupation PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 275.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) THOMAS GLYNN, III	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 15 PRENTISS LN	<b>Transaction ID:</b> SA11AI.58934
	City State Zip Code BELMONT MA 02478	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Partners Health Care Occupation Chief Operating Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROSS HAGHIGHAT	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 3 Calista Terr	<b>Transaction ID:</b> SA11AI.58952
	City State Zip Code Westford MA 01886	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Triton Systems Inc. Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT HARDING	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 314 North Dennis Rd	<b>Transaction ID:</b> SA11AI.58957
	City State Zip Code Yarmouth MA 02675-1646	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) ELISABETH HATFIELD	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 1 POTTER POND	<b>Transaction ID:</b> SA11AI.58958
	City State Zip Code LEXINGTON MA 02421	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen Healy	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 95 North Main Street	<b>Transaction ID:</b> SA11AI.58959
	City State Zip Code Westford MA 01886	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Staff Director City of Methuen	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2650.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) RONALD HOLLANDER	Date of Receipt MM / DD / YYYY 05 / 01 / 2007
	Mailing Address 15 WAMESIT RD	<b>Transaction ID:</b> SA11AI.58969
	City State Zip Code NEWTON MA 02468	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MASS HOSPITAL ASSN PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 16 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
**ESTELLE KATZ**  
 Mailing Address **41 PARK ST**  
**107**  
 City **BROOKLINE** State **MA** Zip Code **02446**  
 Date of Receipt **05 / 01 / 2007**  
**Transaction ID: SA11AI.58991**  
 Amount of Each Receipt this Period **250.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **SELF-EMPLOYED** Occupation **PSYCHOLOGIST**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **275.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR DENNIS KEARNEY**  
 Mailing Address **7 MADISON AVE WEST**  
 City **WINCHESTER** State **MA** Zip Code **01890-3002**  
 Date of Receipt **05 / 04 / 2007**  
**Transaction ID: SA11AI.58993**  
 Amount of Each Receipt this Period **417.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **KEARNEY DONOVAN & MCGEE** Occupation **ATTORNEY**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **417.00**

**C.** Full Name (Last, First, Middle Initial)  
**JOHN KINNEY**  
 Mailing Address **107 Goodman'S Hill Rd**  
 City **Sudbury** State **MA** Zip Code **01776**  
 Date of Receipt **05 / 04 / 2007**  
**Transaction ID: SA11AI.59000**  
 Amount of Each Receipt this Period **400.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **400.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1067.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 17 / 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
PATRICK LEARY

Mailing Address 568 OLD TOWN WAY

City State Zip Code  
HANOVER MA 02339

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

Name of Employer Grand Circle Travel Occupation VP Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.59010

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
ROBERT LEBLANC

Mailing Address 2 Gaythorne Rd.

City State Zip Code  
METHUEN MA 01844

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59011

Amount of Each Receipt this Period  
400.00

**C.**

Full Name (Last, First, Middle Initial)  
DAVID MAGNANI

Mailing Address 13 Cherry Oca Ln

City State Zip Code  
Framingham MA 01702

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

Name of Employer ED ACTION ASSOCIATES Occupation EDUCATIONAL CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59031

Amount of Each Receipt this Period  
150.00

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

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

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

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

FOR LINE NUMBER: PAGE 18 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
**ANNE MAIN**  
 Mailing Address **4 Brookdale Rd**  
 City **Arlington** State **MA** Zip Code **02474**  
 Date of Receipt **05 / 08 / 2007**  
**Transaction ID: SA11AI.59033**  
 Amount of Each Receipt this Period **100.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RASKY BAERLEIN** Occupation **Public Relations**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

**B.** Full Name (Last, First, Middle Initial)  
**MS MICHELLE MCGEE**  
 Mailing Address **19 Concord St**  
 City **Charlestown** State **MA** Zip Code **02129-2524**  
 Date of Receipt **05 / 04 / 2007**  
**Transaction ID: SA11AI.59046**  
 Amount of Each Receipt this Period **417.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **KEARNEY, DONOVAN AND MCGEE** Occupation **ATTORNEY**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **417.00**

**C.** Full Name (Last, First, Middle Initial)  
**Patricia McGovern**  
 Mailing Address **12 William Street**  
 City **Andover** State **MA** Zip Code **01810**  
 Date of Receipt **05 / 25 / 2007**  
**Transaction ID: SA11AI.59047**  
 Amount of Each Receipt this Period **250.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **CARE GROUP** Occupation **ATTORNEY**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **767.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) THOMAS MCGRATH		Date of Receipt
	Mailing Address PO Box 837		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Pepperell	MA	01463
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer AT HOME		Occupation	<b>Transaction ID:</b> SA11AI.59048
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="335.00"/>	<input type="text" value="250.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) DONALD MILLER		Date of Receipt
	Mailing Address 170 MAIN STREET		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	TEWKSBURY	MA	01876-1765
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MRRIMACK FAMILY MEDICINE		Occupation PROFESSIONAL	<b>Transaction ID:</b> SA11AI.59061
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) MUSHTAQUE MIRZA		Date of Receipt
	Mailing Address 843 MASSACHUSETTS AVE 3		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	CAMBRIDGE	MA	02139-3069
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation ENGINEER	<b>Transaction ID:</b> SA11AI.59062
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="325.00"/>	<input type="text" value="250.00"/>

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) DANIEL MOEN	Date of Receipt MM / DD / YYYY 05 / 25 / 2007
	Mailing Address 232 E Monomonac Rd	<b>Transaction ID:</b> SA11AI.59066
	City Ringe State NH Zip Code 03461-6023	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Henry Heyward Hospital Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERT NORTON	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 138 BRIDGE ST	<b>Transaction ID:</b> SA11AI.59078
	City MANCHESTER State MA Zip Code 01944	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer North Shore Medical Center Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN O'BRIEN	Date of Receipt MM / DD / YYYY 05 / 04 / 2007
	Mailing Address 50 Clubhouse Way	<b>Transaction ID:</b> SA11AI.59082
	City Sutton State MA Zip Code 01590	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer UMass Memorial Health Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 64  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
DELIA O'CONNOR

Mailing Address 52 Purchase St

City State Zip Code  
Newburyport MA 01950

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

Name of Employer Anna Jacques Hospital Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11AI.59084

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
PAUL J O'SULLIVAN

Mailing Address 18 Laurelwood Dr

City State Zip Code  
Norwell MA 02061

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

Name of Employer O'Sullivan & Associates Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: SA11AI.59086

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
TODD PATKIN

Mailing Address 11 Mary Way

City State Zip Code  
Foxborough MA 02035-2777

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

Name of Employer AUTOPART INTERNATIONAL Occupation VICE CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11AI.59103

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 64  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
FRANCIS PERULLO

Mailing Address 10 BOWDOIN ST  
202

City State Zip Code  
BOSTON MA 02114

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

Name of Employer Occupation  
SAGE SYSTEMS PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.59110

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
JOHN POLANOWICZ

Mailing Address 137 Madison Rd

City State Zip Code  
Northborough MA 01532

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

Name of Employer Occupation  
MARLBOROUGH HOSPITAL CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59117

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
THOMAS RAICHE

Mailing Address 14 TUTTLE ST

City State Zip Code  
SAUGUS MA 01906

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

Name of Employer Occupation  
NORTHWEST AIRLINES BAGGAGE HANDLER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.59123

Amount of Each Receipt this Period  
250.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 64  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.** Full Name (Last, First, Middle Initial)  
MICHAL REGUNBERG

Mailing Address 449 Franklin St

City State Zip Code  
Cambridge MA 02139-3168

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

Name of Employer Massachusetts Hospital As-  
socia Occupation Public Affairs

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59126

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
PAMELA RESOR

Mailing Address 5 PROCTOR ST

City State Zip Code  
ACTON MA 01720-5735

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

Name of Employer COMMONWEALTH OF MASSACHU-  
SETTS Occupation STATE SENATOR

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59127

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL SACK

Mailing Address 5 SHASTA DR

City State Zip Code  
NORTH READING MA 01864

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

Name of Employer Hallmark Health System Occupation CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59144

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 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 64  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
LESTER SCHINDEL

Mailing Address 273 Belknap Rd

City State Zip Code  
Framingham MA 01701-4716

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

Name of Employer Occupation  
Merrimack Valley Hospital CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59147

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. BENJAMIN SCHWARTZ

Mailing Address 71 LOCKES VILLAGE RD

City State Zip Code  
WENDELL MA 01379

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

Name of Employer Occupation  
SELF-EMPLOYED SPEECHWRITER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.59150

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
LOIS SHAEVEL

Mailing Address 241 Perkins St  
D502

City State Zip Code  
Boston MA 02130

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

Name of Employer Occupation  
Unemployed

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59155

Amount of Each Receipt this Period  
400.00

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

1650.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 64  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
JAMES SMITH

Mailing Address 22 Phillips Beach Ave

City State Zip Code  
Swampscott MA 01907

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

Name of Employer Occupation  
Smith, Segel & Sowalsky Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11AI.59165

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
JAMES SPENCER

Mailing Address 140 BAYSWATER ST  
1

City State Zip Code  
BOSTON MA 02128-1245

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

Name of Employer Occupation  
THE CAMPAIGN NETWORK CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11AI.59173

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
ARTHUR STGERMAIN

Mailing Address 159 Sycamore Dr

City State Zip Code  
Holden MA 01520-1150

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: SA11AI.59177

Amount of Each Receipt this Period  
250.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
BETTY TAYMOR

Mailing Address 975 MEMORIAL DR  
601

City State Zip Code  
CAMBRIDGE MA 02138-4870

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.59180

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Wasserman

Mailing Address 193 Argilla Road

City State Zip Code  
Ipswich MA 01938

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

Name of Employer Occupation  
NSCC adjunct faculty

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59200

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
ELLEN ZANE

Mailing Address 70 Lazell St

City State Zip Code  
Hingham MA 02043-4404

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

Name of Employer Occupation  
NEMC CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.59213

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 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 27 / 64	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) VICKI ZWERDLING		Date of Receipt																					
	Mailing Address 239 West Canton St 1		<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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	4		2	0	0	7														
	City Boston State MA Zip Code 02116		<b>Transaction ID:</b> SA11AI.59215																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00																					
Name of Employer COMMONWEALTH OF MA Occupation SCHEDULER																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	38651.00

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

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

FOR LINE NUMBER: PAGE 28 / 64  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
 Barney Frank For Congress Committee  
 Mailing Address PO Box 260  
 City State Zip Code  
 Newtonville MA 02460  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
**Transaction ID:** SA11C.58814  
 Amount of Each Receipt this Period  
 75.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5075.00

**B.** Full Name (Last, First, Middle Initial)  
 CAM KERRY COMMITTEE  
 Mailing Address PO BOX 990424  
 City State Zip Code  
 BOSTON MA 02199  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7  
**Transaction ID:** SA11C.59216  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
 Goldman, Sachs CO.  
 Mailing Address 85 Broad St  
 City State Zip Code  
 New York NY 10004  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7  
**Transaction ID:** SA11C.59381  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6075.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 64

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
IBEW - C O P E

Mailing Address 900 SEVENTH ST. NW

City State Zip Code  
WASHINGTON DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11C.58813

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
John Tierney For Congress

Mailing Address 9 Main St  
11

City State Zip Code  
Peabody MA 01960

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11C.58927

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Massachusetts Afl-Cio Cope

Mailing Address 389 Main Street

City State Zip Code  
Malden MA 02148

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11C.58810

Amount of Each Receipt this Period

5000.00

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

10250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 64  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.** Full Name (Last, First, Middle Initial)  
Massachusetts Association of Community Health Inc.

Mailing Address 40 Court St  
10th fl

City State Zip Code  
Boston MA 02108

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11C.59260

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Niki Tsongas Committee

Mailing Address PO Box 1454

City State Zip Code  
Lowell MA 01853

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11C.59221

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
NIXON PEABODY LLP FEDERAL PAC

Mailing Address PO BOX 31051 CLINTON SQ

City State Zip Code  
ROCHESTER NY 14603

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11C.58817

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7700.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 64  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
 O'Brien Committee To Elect Tom  
 Mailing Address 27 Longwood Circle  
 City State Zip Code  
 Kingston MA 02364  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7  
**Transaction ID:** SA11C.58808  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
 O'Neill and Associates, LLC  
 Mailing Address 31 New Chardon St  
 City State Zip Code  
 Boston MA 02114-4701  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7  
**Transaction ID:** SA11C.58950  
 Amount of Each Receipt this Period  
 200.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
 Planned Parenthood League of Massachusetts, Inc.  
 Mailing Address 1055 Commonwealth Ave  
 City State Zip Code  
 Boston MA 02215  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
**Transaction ID:** SA11C.59218  
 Amount of Each Receipt this Period  
 225.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **525.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 32 / 64  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.** Full Name (Last, First, Middle Initial)  
 Planned Parenthood League of Massachusetts, Inc.  
 Mailing Address 1055 Commonwealth Ave  
 City State Zip Code  
 Boston MA 02215  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
**Transaction ID:** SA11C.59219  
 Amount of Each Receipt this Period  
 75.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
 UNITED FOOD AND COMMERCIAL WORKERS INTER  
 Mailing Address 1775 K STREET N.W.  
 City State Zip Code  
 WASHINGTON DC 20006  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
**Transaction ID:** SA11C.58806  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
 Utility Workers of America Afl-Cio Local 369  
 Mailing Address 120 Bay State Drive  
 City State Zip Code  
 Braintree MA 02184  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
**Transaction ID:** SA11C.59258  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7575.00**  
**TOTAL** This Period (last page this line number only) ..... ► **32125.00**

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

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

FOR LINE NUMBER: PAGE 33 / 64  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
 MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.** Full Name (Last, First, Middle Initial)  
 ASDC - PARTNERSHIP PROGRAM  
 Mailing Address 430 SOUTH CAPITOL ST. SE  
 City State Zip Code  
 WASHINGTON DC 20003  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
 Transaction ID: SA12.59262  
 Amount of Each Receipt this Period  
 1548.50  
 Proceeds from joint fund-  
 raising  
 Name of Employer Occupation  
 Receipt For:  Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3435.67

**B.** Full Name (Last, First, Middle Initial)  
 DEMOCRATIC NATIONAL COMMITTEE  
 Mailing Address 430 SOUTH CAPITAL ST SE  
 City State Zip Code  
 WASHINGTON DC 20003  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7  
 Transaction ID: SA12.59261  
 Amount of Each Receipt this Period  
 4639.00  
 Proceeds from joint fund-  
 raising  
 Name of Employer Occupation  
 Receipt For:  Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4639.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6187.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	6187.50

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 64

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A.**

Full Name (Last, First, Middle Initial)  
ADP

Mailing Address 225 Second Avenue

City State Zip Code  
Waltham MA 02154

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4022.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: SA15.59308

Amount of Each Receipt this Period  
1728.21

Refund of overpayment

**B.**

Full Name (Last, First, Middle Initial)  
Robert Boutwell

Mailing Address 286 Marlborough

City State Zip Code  
Boston MA 02116

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1094.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA15.59259

Amount of Each Receipt this Period  
1094.37

COBRA payment

**C.**

Full Name (Last, First, Middle Initial)  
Mary Wong

Mailing Address 120 Stedman Street

City State Zip Code  
Brookline MA 02446

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

Name of Employer Consultant Occupation  
WIN! Group

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 364.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA15.59275

Amount of Each Receipt this Period  
364.75

COBRA payment

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

3187.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 64	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

**A.**

Full Name (Last, First, Middle Initial) Mary Wong		Date of Receipt																					
Mailing Address 120 Stedman Street		<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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	5		2	0	0	7														
City	State	Zip Code	<b>Transaction ID:</b> SA15.59276																				
Brookline	MA	02446	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="364.75"/>																				
Name of Employer Consultant	Occupation WIN! Group																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="729.50"/>																						
			COBRA payment																				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="364.75"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="3552.08"/>

**SCHEDULE B (FEC Form 3X)  
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"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A.

Full Name (Last, First, Middle Initial)

City National Bank

Transaction ID: SB21B.62713

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	7

Mailing Address Plaza Towers Office  
2029 Century Park East

City Los Angeles State CA Zip Code 90067

Amount of Each Disbursement this Period

51.00
-------

Purpose of Disbursement  
Bank service charge

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

51.00

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

51.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Boston Carmen'S Union Local 589</p> <p>Mailing Address 295 Devonshire St 5th Floor</p> <p>City Boston State MA Zip Code 02110</p> <p>Purpose of Disbursement Contribution refund</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28C.59366</p> <p>Date of Disbursement 05 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Boston Teachers Union</p> <p>Mailing Address 180 MT Vernon St</p> <p>City Dorchester State MA Zip Code 02125</p> <p>Purpose of Disbursement Contribution refund</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28C.59363</p> <p>Date of Disbursement 05 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) International Brotherhood of Electrical Workers - Local 2324 Afl-Cio</p> <p>Mailing Address 281 Cottage St</p> <p>City Springfield State MA Zip Code 01104</p> <p>Purpose of Disbursement Contribution refund</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28C.59369</p> <p>Date of Disbursement 05 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A.	Full Name (Last, First, Middle Initial) Iron Workers District Council of New England	Transaction ID: SB28C.59370 Date of Disbursement
	Mailing Address PO Box 96	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City So. Boston State MA Zip Code 02127	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution refund	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LOCAL 1301 CWA	Transaction ID: SB28C.59371 Date of Disbursement
	Mailing Address 10 ROGERS ST 619	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City CAMBRIDGE State MA Zip Code 02142	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution refund	<input type="text" value="1250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MASSACHUSETTS AFL-CIO	Transaction ID: SB28C.59374 Date of Disbursement
	Mailing Address 389 MAIN ST	<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City MALDEN State MA Zip Code 02148	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution refund	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6750.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Professional Fire Fighters of Massachusetts Peoples Committee Mailing Address 130 Bowdoin St 710 City Boston State MA Zip Code 02108 Purpose of Disbursement Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28C.59368 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	Amount of Each Disbursement this Period 250.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Sheet Metal Workers Local 17 Mailing Address 1157 Adams Street City Dorchester State MA Zip Code 02124 Purpose of Disbursement Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28C.59365 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	Amount of Each Disbursement this Period 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Utility Workers of America Afl-Cio Local 369 Mailing Address 120 Bay State Drive City Braintree State MA Zip Code 02184 Purpose of Disbursement Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28C.59372 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 7	Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>20500.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 64

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB30B.59299 Date of Disbursement 05 / 04 / 2007
	Mailing Address 225 Second Avenue	Amount of Each Disbursement this Period 64.61
	City Waltham State MA Zip Code 02154	
	Purpose of Disbursement Payroll fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB30B.59300 Date of Disbursement 05 / 04 / 2007
	Mailing Address 225 Second Avenue	Amount of Each Disbursement this Period 3587.79
	City Waltham State MA Zip Code 02154	
	Purpose of Disbursement Payroll tax expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB30B.59342 Date of Disbursement 05 / 18 / 2007
	Mailing Address 225 Second Avenue	Amount of Each Disbursement this Period 64.61
	City Waltham State MA Zip Code 02154	
	Purpose of Disbursement Payroll fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3717.01

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB30B.59343 Date of Disbursement 05 / 18 / 2007
	Mailing Address 225 Second Avenue	Amount of Each Disbursement this Period 3664.49
	City Waltham State MA Zip Code 02154	
	Purpose of Disbursement Payroll tax expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield	Transaction ID: SB30B.59377 Date of Disbursement 05 / 31 / 2007
	Mailing Address Po Box 4701	Amount of Each Disbursement this Period 1197.09
	City Woburn State MA Zip Code 01888	
	Purpose of Disbursement Health insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Chick Montana Group	Transaction ID: SB30B.59325 Date of Disbursement 05 / 17 / 2007
	Mailing Address 202 Bonham Road	Amount of Each Disbursement this Period 1150.00
	City Dedham State MA Zip Code 02026	
	Purpose of Disbursement Compliance services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	6011.58
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Chick Montana Group  Mailing Address 202 Bonham Road  City Dedham State MA Zip Code 02026  Purpose of Disbursement Compliance services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.59379 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7  Amount of Each Disbursement this Period 1275.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Matthew Demerle  Mailing Address 286 Highland Ave  City Somerville State MA Zip Code 02145  Purpose of Disbursement Salary expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.59301 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7  Amount of Each Disbursement this Period 975.30
<b>C.</b>	Full Name (Last, First, Middle Initial) Matthew Demerle  Mailing Address 286 Highland Ave  City Somerville State MA Zip Code 02145  Purpose of Disbursement Salary expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.59344 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7  Amount of Each Disbursement this Period 865.68

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

3115.98

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ANNA KELLY</p> <p>Mailing Address 45 Ashford St #3</p> <p>City Boston State MA Zip Code 02134</p> <p>Purpose of Disbursement Salary expense</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.59361</p> <p>Date of Disbursement 05 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 1728.21</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) STACEY MONAHAN</p> <p>Mailing Address 7 Westmoreland St 2</p> <p>City Boston State MA Zip Code 02124</p> <p>Purpose of Disbursement Salary expense</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.59298</p> <p>Date of Disbursement 05 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 2076.90</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) STACEY MONAHAN</p> <p>Mailing Address 7 Westmoreland St 2</p> <p>City Boston State MA Zip Code 02124</p> <p>Purpose of Disbursement Salary expense</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.59345</p> <p>Date of Disbursement 05 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 2076.91</p>

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

5882.02

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

# SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Small Business Service Bureau  Mailing Address 554 Main St., P.O. Box 15014  City Worcester State MA Zip Code 01615  Purpose of Disbursement Health insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.59367 Date of Disbursement 05 / 24 / 2007  Amount of Each Disbursement this Period 1119.37
<b>B.</b>	Full Name (Last, First, Middle Initial) Patricia Vantine  Mailing Address 35 Pond St  City Abington State MA Zip Code 02351  Purpose of Disbursement Salary expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.59302 Date of Disbursement 05 / 04 / 2007  Amount of Each Disbursement this Period 1369.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia Vantine  Mailing Address 35 Pond St  City Abington State MA Zip Code 02351  Purpose of Disbursement Salary expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.59346 Date of Disbursement 05 / 18 / 2007  Amount of Each Disbursement this Period 1749.39

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

4237.76

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 64

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A.	Full Name (Last, First, Middle Initial) JOHN WALSH	Transaction ID: SB30B.59303 Date of Disbursement 05 / 04 / 2007
	Mailing Address 99 CROSSLEY ST	Amount of Each Disbursement this Period 2149.20
	City ABINGTON State MA Zip Code 02351	
	Purpose of Disbursement Salary expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JOHN WALSH	Transaction ID: SB30B.59347 Date of Disbursement 05 / 18 / 2007
	Mailing Address 99 CROSSLEY ST	Amount of Each Disbursement this Period 2149.20
	City ABINGTON State MA Zip Code 02351	
	Purpose of Disbursement Salary expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4298.40

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

27262.75

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 46 / 64	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Early fo Congress Committee			Nature of Debt (Purpose): voter lists
Mailing Address 52 Highland Street			
City Worcester	State MA	ZIP Code 01602	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD9.10864</b>	
4687.40			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4687.40	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	4687.40
2) <b>TOTALS</b> This Period (last page this line number only).....	4687.40
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	4687.40

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor MTA			Nature of Debt (Purpose): phones
Mailing Address 2 Ashburton Place			
City Boston	State MA	ZIP Code 02108	

Outstanding Balance Beginning This Period		Transaction ID: SD10.10871	
1017.76			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1017.76	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Special Event Rentals			Nature of Debt (Purpose): equipment rent
Mailing Address PO Box 70623			
City Worcester	State MA	ZIP Code 01607	

Outstanding Balance Beginning This Period		Transaction ID: SD10.10868	
644.44			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	644.44	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	1662.20
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	1662.20
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	1662.20

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 48 / 64

NAME OF COMMITTEE (In Full)

**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

**Roosevelt Dinner 2007 (04/26/2007)**

ACTIVITY IS:

 Fundraising       Direct Candidate Support

CHECK IF THE RATIO IS:

 New       Revised       Same as Previously Reported

FEDERAL %

**41.00** %

NONFEDERAL %

**59.00** %Transaction ID:  
H2.59336

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A. Full Name (Last, First, Middle Initial)**  
Authorize.net

Mailing Address  
915 S 500 E Suite 200

City	State	Zip Code	Category/ Type
American Fork	UT	84003	

Purpose of Disbursement:  
Bank service charge

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
59824.08

Date  /  /   
**Transaction ID:** H4.59277

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.60		22.40		35.00

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

Mailing Address  
7300 Chapman Hwy

City	State	Zip Code	Category/ Type
Knoxville	TN	37807	

Purpose of Disbursement:  
Credit card processing

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
60319.67

Date  /  /   
**Transaction ID:** H4.59278

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.41		317.18		495.59

**C. Full Name (Last, First, Middle Initial)**  
Saltus Press

Mailing Address  
24 Jolma Rd

City	State	Zip Code	Category/ Type
Worcester	MA	01604	

Purpose of Disbursement:  
Printing & postage

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
63317.02

Date  /  /   
**Transaction ID:** H4.59279

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1079.05		1918.30		2997.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1270.06		2257.88		3527.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> Bank of America			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15019			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">63797.64</div>	
City Wilmington	State DE	Zip Code 19886-5019	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	
Purpose of Disbursement: See detail			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 03 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59282	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.02		307.60		480.62

<b>B. Full Name (Last, First, Middle Initial)</b> Delta Air Lines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11 Logan Airport			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
City East Boston	State MA	Zip Code 02128	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	
Purpose of Disbursement: Air travel			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 30 / 2007</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59284	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.37		82.44		128.81

<b>C. Full Name (Last, First, Middle Initial)</b> Delta Air Lines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11 Logan Airport			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
City East Boston	State MA	Zip Code 02128	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	
Purpose of Disbursement: Air travel			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 30 / 2007</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59285	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.37		82.44		128.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.02		307.60		480.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

**A. Full Name (Last, First, Middle Initial)**  
Amazon.com

Mailing Address  
605 5th Ave S

City	State	Zip Code	Category/ Type
Seattle	WA	98104	

Purpose of Disbursement:  
Software expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date  /  /   
**Transaction ID:** H4.59286

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.99		111.98		174.97

**B. Full Name (Last, First, Middle Initial)**  
BJ's Wholesale Club-Weymouth

Mailing Address  
622 Washington St

City	State	Zip Code	Category/ Type
Weymouth	MA	02188	

Purpose of Disbursement:  
Office supplies expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date  /  /   
**Transaction ID:** H4.59288

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.33		20.14		31.47

**C. Full Name (Last, First, Middle Initial)**  
Park Avenue Market

Mailing Address  
46 Park Ave

City	State	Zip Code	Category/ Type
S Weymouth	MA	02190	

Purpose of Disbursement:  
Office supplies expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date  /  /   
**Transaction ID:** H4.59290

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.96		10.60		16.56

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

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

Mailing Address  
35 Pond St

City State Zip Code  
Abington MA 02351

Purpose of Disbursement:  
See reimbursement detail

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63852.28

Date 05 / 03 / 2007

Transaction ID: H4.59292

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.67		34.97		54.64

**B. Full Name (Last, First, Middle Initial)**  
Home Depot

Mailing Address  
1 Mystic View Rd

City State Zip Code  
Everett MA 02149

Purpose of Disbursement:  
Office supplies expense

Category/  
Type

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 04 / 22 / 2007

Transaction ID: H4.59293

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.70		4.81		7.51

**C. Full Name (Last, First, Middle Initial)**  
Patricia Vantine

Mailing Address  
35 Pond St

City State Zip Code  
Abington MA 02351

Purpose of Disbursement:  
Parking expense

Category/  
Type

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 04 / 24 / 2007

Transaction ID: H4.59294

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80		3.20		5.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.67		34.97		54.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A. Full Name (Last, First, Middle Initial)</b> Patricia Vantine			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 35 Pond St			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>		
Abington	MA	02351			
Purpose of Disbursement: Mileage			Category/ Type		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59295		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.59		1.05		1.64

<b>B. Full Name (Last, First, Middle Initial)</b> BJ's Wholesale Club-Weymouth			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 622 Washington St			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>		
Weymouth	MA	02188			
Purpose of Disbursement: Mileage expesnse			Category/ Type		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59296		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.78		6.71		10.49

<b>C. Full Name (Last, First, Middle Initial)</b> Fairmont Copley Plaza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 138 St James St			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Boston	MA	02118			
Purpose of Disbursement: Parking expense			Category/ Type		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59297		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.80		19.20		30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A. Full Name (Last, First, Middle Initial)</b> ALIPES CME			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 99 Summer Street			Allocated Activity or Event Year-To-Date 68152.28		
City Boston	State MA	Zip Code 02108	Date MM / DD / YYYY 05 / 05 / 2007		
Purpose of Disbursement: Website expense			Transaction ID: H4.59305		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1548.00		2752.00		4300.00

<b>B. Full Name (Last, First, Middle Initial)</b> Roland Street Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 15 Third Ave			Allocated Activity or Event Year-To-Date 72402.28		
City Burlington	State MA	Zip Code 01950	Date MM / DD / YYYY 05 / 05 / 2007		
Purpose of Disbursement: Rent expense			Transaction ID: H4.59306		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1530.00		2720.00		4250.00

<b>C. Full Name (Last, First, Middle Initial)</b> Comcast			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 196			Allocated Activity or Event Year-To-Date 72497.28		
City Newark	State NJ	Zip Code 07101	Date MM / DD / YYYY 05 / 05 / 2007		
Purpose of Disbursement: Cable TV expense			Transaction ID: H4.59307		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.20		60.80		95.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3112.20		5532.80		8645.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> Eastern Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 195 Market Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">72547.28</div>	
City	State	Zip Code	Category/ Type	
Lynn	MA	01901		
Purpose of Disbursement: Bank service charge			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 11 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59315	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

<b>B. Full Name (Last, First, Middle Initial)</b> Sullivan Insurance Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 370 Main Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">74471.28</div>	
City	State	Zip Code	Category/ Type	
Worcester	MA	01608		
Purpose of Disbursement: Insurance expense			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 17 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59322	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
692.64		1231.36		1924.00

<b>C. Full Name (Last, First, Middle Initial)</b> SER Exposition Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 35 B New St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">78181.65</div>	
City	State	Zip Code	Category/ Type	
Worcester	MA	01605		
Purpose of Disbursement: Services for Dem State Conv			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 17 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59323	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1335.73		2374.64		3710.37

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2046.37		3638.00		5684.37

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> 3 B Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 116			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">79992.90</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
Dover	MA	02030		
Purpose of Disbursement: Radios for state convention			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 17 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59330	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
652.05		1159.20		1811.25

<b>B. Full Name (Last, First, Middle Initial)</b> CIT Technology Fin Serv, Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 33076			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">80613.80</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
Newark	NJ	07188		
Purpose of Disbursement: Copier rental expense			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 17 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59331	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
223.52		397.38		620.90

<b>C. Full Name (Last, First, Middle Initial)</b> Duplitrn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 244 Liberty St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">80793.80</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
Brockton	MA	02301		
Purpose of Disbursement: Copier service contract			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 17 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59337	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.80		115.20		180.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
940.37		1671.78		2612.15

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7247-7090			Allocated Activity or Event Year-To-Date 81397.80		
City Philadelphia	State PA	Zip Code 19175	Date <input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Subscription expense			Transaction ID: H4.59339		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.44		386.56		604.00

<b>B. Full Name (Last, First, Middle Initial)</b> Poland Spring Water			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 375 Paramount Drive			Allocated Activity or Event Year-To-Date 81480.71		
City Raynham	State MA	Zip Code 02767	Date <input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Office supplies expense			Transaction ID: H4.59340		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.85		53.06		82.91

<b>C. Full Name (Last, First, Middle Initial)</b> MATTHEW KITSOS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6 Cortland Rd			Allocated Activity or Event Year-To-Date 82980.71		
City Haverhill	State MA	Zip Code 01830	Date <input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Scholarship expense			Transaction ID: H4.59341		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
540.00		960.00		1500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
787.29		1399.62		2186.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND**

<b>A. Full Name (Last, First, Middle Initial)</b> NANCY ANDERSON			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 18 Barrington Rd			Allocated Activity or Event Year-To-Date 83377.56		
City	State	Zip Code	Category/Type		
Boston	MA	02124			
Purpose of Disbursement: See detail					
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>		
			Transaction ID: H4.59348		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.87		253.98		396.85

<b>B. Full Name (Last, First, Middle Initial)</b> NANCY ANDERSON			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 18 Barrington Rd			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/Type		
Boston	MA	02124			
Purpose of Disbursement: Mileage expense					
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Date <input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>		
			Transaction ID: H4.59349		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.57		145.01		226.58

<b>C. Full Name (Last, First, Middle Initial)</b> 4 Team Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11555 Heron Bay Blvd			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/Type		
Coral Springs	FL	33076			
Purpose of Disbursement: Software expense					
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Date <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
			Transaction ID: H4.59350		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.38		9.57		14.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.87		253.98		396.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> Hess 21308			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 123 Cambridge St			Allocated Activity or Event Year-To-Date [0.00]	
City Charlestown	State MA	Zip Code 02129	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> [05 / 09 / 2007]	
Purpose of Disbursement: Office supplies expense				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.59352	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[1.96]		[3.49]		[5.45]

<b>B. Full Name (Last, First, Middle Initial)</b> Center Plaza Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address One Center Plaza			Allocated Activity or Event Year-To-Date [0.00]	
City Boston	State MA	Zip Code 02108	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> [05 / 11 / 2007]	
Purpose of Disbursement: Parking expense				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.59353	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[12.24]		[21.76]		[34.00]

<b>C. Full Name (Last, First, Middle Initial)</b> Finagle a Bagel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 129 Tremont St			Allocated Activity or Event Year-To-Date [0.00]	
City Boston	State MA	Zip Code 02108	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> [05 / 11 / 2007]	
Purpose of Disbursement: Meetings expense				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.59355	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[4.53]		[8.06]		[12.59]

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.00]		[0.00]		[0.00]

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[0.00]	[0.00]	[0.00]

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> UMASS Amherst Garage			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 Campus Wy			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Amherst	MA	01003		
Purpose of Disbursement: Parking expense			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">05 / 19 / 2007</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59357	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; display: inline-block; padding: 2px;">9.72</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">17.28</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">27.00</div>

<b>B. Full Name (Last, First, Middle Initial)</b> Staples			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1690 Boston Post Road			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Springfield	MA	01151		
Purpose of Disbursement: Office supplies expense			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">05 / 19 / 2007</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.59359	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; display: inline-block; padding: 2px;">27.46</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">48.82</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">76.28</div>

<b>C. Full Name (Last, First, Middle Initial)</b> Broadview Networks			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1250 Hancock Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">84276.72</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Quincy	MA	02169		
Purpose of Disbursement: Telephone expense			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">05 / 21 / 2007</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.59360	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; display: inline-block; padding: 2px;">323.70</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">575.46</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">899.16</div>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; display: inline-block; padding: 2px;">323.70</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">575.46</div>		<div style="border: 1px solid black; display: inline-block; padding: 2px;">899.16</div>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; display: inline-block; padding: 2px;"></div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;"></div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;"></div>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

<b>A. Full Name (Last, First, Middle Initial)</b> Deschamps Printing Co. Inc.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3 Dodge Street P.O. Box 127			Allocated Activity or Event Year-To-Date 81569.08		
City State Zip Code Salem MA 01970	Category/ Type		Date MM / DD / YYYY 05 / 17 / 2007		
Purpose of Disbursement: Printing expense			Transaction ID: H4.59332		
Activity or Event Identifier: Roosevelt Dinner 2007(04/26/2007)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1718.13		2472.42		4190.55

<b>B. Full Name (Last, First, Middle Initial)</b> Grossman Marketing Group			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 30 Cobble Hill Rd			Allocated Activity or Event Year-To-Date 82674.08		
City State Zip Code Somerville MA 02143	Category/ Type		Date MM / DD / YYYY 05 / 17 / 2007		
Purpose of Disbursement: Printing expense			Transaction ID: H4.59338		
Activity or Event Identifier: Roosevelt Dinner 2007(04/26/2007)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.05		651.95		1105.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2171.18		3124.37		5295.55

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
10986.73		18796.46		29783.19

**Image# 28930533492**

Form/Schedule: **F3XA**

Contributions from Goldman Sachs, Mass Association of Community Health Inc, O'Neill & Associates and Planned Parenthood of Massachusetts Inc. were received during this period. Those contributions were determined to be from impermissible sources and will be refunded during the next reporting period.

Transaction ID:

Form/Schedule: **SA12**

The committee is awaiting supporting memo entry schedules and will amend the appropriate reports when the data is received.

Transaction ID: **SA12.59262**

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**Image# 28930533493**

Form/Schedule: **SA12** This transfer is supported by memo entries reported on the January 31, 2007 year-end report and the April, 2007  
Transaction ID: **SA12.59261** monthly report.

Form/Schedule: **SD9** (Current loan balance of 4687.40 has been forgiven)  
Transaction ID: **SD9.10864**

\*\*\*\*\*

**Image# 28930533494**

Form/Schedule: **SD10** (Current loan balance of 1017.76 has been forgiven)

Transaction ID: **SD10.10871**

Form/Schedule: **SD10** (Current loan balance of 644.44 has been forgiven)

Transaction ID: **SD10.10868**

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