



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

March 9, 2005

Wayne Craig, Treasurer  
Harborside Healthcare Corporation PAC  
One Beacon Street  
Boston, MA 02108

**Response Due Date:**  
**April 8, 2005**

Identification Number: C00350074

Reference: Year End Report (1/1/03-12/31/03), April Quarterly Report (1/1/04-3/31/04), July Quarterly Report (4/1/04-6/30/04)

Dear Mr. Craig:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **An adequate response must be received at the Commission by the response date noted above.** An itemization of the information needed follows:

-Please provide a Schedule B to support the entry reported on Line 23 of the Detailed Summary Page. Each contribution made to a federal candidate or committee must be itemized on Schedule B regardless of the amount contributed. 11 CFR §104.3(b)(3)(v)

**Unlike previous election cycles, you will not receive an additional notice from the Commission on this matter.** Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. **Requests for extensions of time in which to respond will not be considered.** Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

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Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1686.

Sincerely,



Elizabeth Boody  
Campaign Finance Analyst  
Reports Analysis Division

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12/3/03

**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 1 OF 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

Harborside Healthcare Croporation PAC

Full Name (Last, First, Middle Initial)

A. Senator Grassley

Mailing Address

City State Zip Code

Purpose of Disbursement  
Campaign Contribution

0 1 1  
Category/  
Type

Candidate Name

Date of Disbursement

05 / 05 / 2003

Amount of Each Disbursement this Period

1 0 0 0 0 0

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

B. Friends of Byron Dorgan

Mailing Address

City State Zip Code

Purpose of Disbursement  
Campaign Contribution

0 1 1  
Category/  
Type

Candidate Name

Date of Disbursement

09 / 02 / 2003

Amount of Each Disbursement this Period

1 0 0 0 0 0

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

C. Bill Thomas Campaign Committee

Mailing Address

City State Zip Code

Purpose of Disbursement  
Campaign Contribution

0 1 1  
Category/  
Type

Candidate Name

Date of Disbursement

09 / 29 / 2003

Amount of Each Disbursement this Period

2 5 0 0 0 0

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

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

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


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12/3/03

# 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 2 OF 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

Harborside Healthcare Corporation PAC

Full Name (Last, First, Middle Initial)

A. Friends of Johnnie Byrd

Mailing Address

City State Zip Code

Purpose of Disbursement  
Campaign Contribution

0 1 1  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
1 2 / 2 3 / 2 0 0 3

Amount of Each Disbursement this Period

1 5 0 0 0 0

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

6 0 0 0 0 0

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

25038763449

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 3/4/05
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label	<input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
	3/28/05
<b>PREPARER</b>	<b>DATE PREPARED</b>