

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

LARSON FOR CONGRESS

ADDRESS (number and street)

PO Box 261172

Check if different  
than previously  
reported. (ACC)

Hartford

CT

06126-1172

2. FEC IDENTIFICATION NUMBER ▼

C

C00330142

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CT

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

04

D D /

25

Y Y Y Y /

2014

through

M M /

06

D D /

30

Y Y Y Y /

2014

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 Barry Feldman

Signature of Treasurer

Barry Feldman

[Electronically Filed]

Date

M M /

07

D D /

15

Y Y Y Y /

2014

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 173

Write or Type Committee Name

**LARSON FOR CONGRESS**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 1 | 4 |

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....  | 273086.72               | 1343552.52                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 0.00                    | 1450.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 273086.72               | 1342102.52                         |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 115881.86               | 872017.33                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....   | 189.75                  | 6984.88                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 115692.11               | 865032.45                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....  | 573883.48               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 989.63                  |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 3662.92                 |                                    |

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 173

Write or Type Committee Name

**LARSON FOR CONGRESS**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 5 |   | 2 | 0 | 1 | 4 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 1 | 4 |

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

79231.00

434094.28

**(ii) Unitemized.....**

21087.00

97188.14

**(iii) TOTAL of contributions from individuals ▶**

100318.00

531282.42

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

172768.72

812270.10

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

273086.72

1343552.52

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

189.75

6984.88

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

409.36

1238.22

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

273685.83

1351775.62

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 173

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 115881.86                     | 872017.33                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 1450.00                            |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 1450.00                            |
| 21. OTHER DISBURSEMENTS .....  | 33531.00                      | 221915.72                          |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 149412.86                     | 1095383.05                         |

## **III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 449610.51 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 273685.83 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 723296.34 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 149412.86 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 573883.48 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Frank Antonacci****A.**

Mailing Address 137 Billings Road

City

Somerville

State

CT

Zip Code

06072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

USA Hauling

Occupation

Vice President

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

**Transaction ID : SA11AI.58192**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Frank Antonacci****B.**

Mailing Address 137 Billings Road

City

Somerville

State

CT

Zip Code

06072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

USA Hauling

Occupation

Vice President

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

**Transaction ID : SA11AI.58193**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**P. Albert Armstrong****C.**

Mailing Address 29 Moseley Terrace

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Armstrong Rockwell

Occupation

Jeweler

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 13    |   | 2014        |

**Transaction ID : SA11AI.58770**

Amount of Each Receipt this Period

150.00

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

2750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Timothy F. Bannon****A.**

Mailing Address 57 Arvine Place

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

375.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

**Transaction ID : SA11AI.58802**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Lauren D. Bazel****B.**

Mailing Address 4321 Tarpon Lane

City

Alexandria

State

VA

Zip Code

22309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alpine Group

Occupation

Vice President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 16  |   | 2014    |

**Transaction ID : SA11AI.58472**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Thomas A. Beach****C.**

Mailing Address 120 Montclair Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Peening Technologies

Occupation

CEO

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
☐ Convention

Election Cycle-to-Date

400.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

**Transaction ID : SA11AI.58203**

Amount of Each Receipt this Period

75.00

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

825.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 173

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Penelope I. Bellamy****A.**

Mailing Address 276 Thimble Islands Rd.

City

Stony Creek

State

CT

Zip Code

06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 14    |   | 2014        |

**Transaction ID : SA11AI.58813**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**James W. Bergenn****B.**

Mailing Address 50 Castlewood Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 11    |   | 2014        |

**Transaction ID : SA11AI.59056**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Judith Berger****C.**

Mailing Address 5621 SW 69th Ave

City

Miami

State

FL

Zip Code

33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MDR Associates

Occupation

President/CEO Health Care

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
☐ Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

**Transaction ID : SA11AI.58224**

Amount of Each Receipt this Period

1000.00

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

1750.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Nan Birdwhistell**

Mailing Address 16 Cleft Rock Lane

City

Woodbridge

State

CT

Zip Code

06525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Murtha Cullina LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 12    |   | 2014        |

Transaction ID : SA11AI.59055

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Harry K. Boardsen**

Mailing Address 3420 Gulfshore Boulevard

City

Naples

State

FL

Zip Code

34106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58393

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Francisco L. Borges**

Mailing Address 12250 Tillinghast Circle

City

Palm Beach Gardens

State

FL

Zip Code

33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Landmark Partners, LLC

Occupation

Chairman

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58132

Amount of Each Receipt this Period

100.00

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

600.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Francisco L. Borges**

Mailing Address 12250 Tillinghast Circle

City

Palm Beach Gardens

State

FL

Zip Code

33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Landmark Partners, LLC

Occupation

Chairman

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58133

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

**Kelly O. Britt**

Mailing Address 102 Terry Lane

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Atlantic Dermatology Assoc.

Occupation

Certified Physician Assistant

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58200

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**Edward H. Budd**

Mailing Address 270 Chestnut Hill Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2014        |

Transaction ID : SA11AI.58994

Amount of Each Receipt this Period

500.00

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

1525.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Deborah I. Buffington**

Mailing Address 56 Leland Drive

City

East Hartford

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Connecticut

Occupation

Senior Caucus Administrator

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58772

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Lorraine J. Calabrese**

Mailing Address 22 Watson Farm

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 23    |   | 2014        |

Transaction ID : SA11AI.58948

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Shari G. Cantor**

Mailing Address 39 Colony Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Volunteer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2014        |

Transaction ID : SA11AI.58422

Amount of Each Receipt this Period

2000.00

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

2150.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John H. Casey

Mailing Address 446 Cedar Lane

City

New Hartford

State

CT

Zip Code

06057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NorthEast, LLC

Occupation

Operation Manager

Receipt For: 2014



Primary



General



Other (specify)

Convention

Election Cycle-to-Date

400.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58493

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Andre K. Charbonneau

Mailing Address 10 Abbe Road

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Contractor

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1625.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 25    |   | 2014        |

Transaction ID : SA11AI.58709

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Ernestine Charbonneau

Mailing Address 10 Abbe Road

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

425.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 03    |   | 2014        |

Transaction ID : SA11AI.58349

Amount of Each Receipt this Period

125.00

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

825.00

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

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

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

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Victoria Woodin Chavey

A.

Mailing Address 128 Steele Road

City

West Hartford

State

CT

Zip Code

06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jackson Lewis PC

Occupation

Lawyer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

375.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 14    |   | 2014      |

Transaction ID : SA11AI.58740

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Patricia J. Christiana

B.

Mailing Address 114 Steep Hollow Lane

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 13    |   | 2014      |

Transaction ID : SA11AI.58798

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Patricia J. Christiana

C.

Mailing Address 114 Steep Hollow Lane

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 14    |   | 2014      |

Transaction ID : SA11AI.58768

Amount of Each Receipt this Period

100.00

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

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

450.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Brian Clemow**

Mailing Address 154 Steele Road

City

West Hartford

State

CT

Zip Code

06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shipman & GoodwinOccupation  
Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 09    |   | 2014      |

Transaction ID : SA11AI.58905

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Sanford Cloud Jr.**

Mailing Address 25 Mountain Spring Road

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Cloud Company, LLCOccupation  
Atty./Real Estate Dev.

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58398

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Richard Z. Cohen**

Mailing Address 450 Maple Avenue

City

Old Saybrook

State

CT

Zip Code

06475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Retail business owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 30    |   | 2014      |

Transaction ID : SA11AI.58978

Amount of Each Receipt this Period

250.00

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

1000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Charles F. Corcoran III**

Mailing Address 155 Tremont Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carmody & TorranceOccupation  
Attorney

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58411

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Theodore R. Cummings**

Mailing Address 87 Lawton Road

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cummings Insurance Co.Occupation  
Owner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 29    |   | 2014        |

Transaction ID : SA11AI.58282

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Theodore R. Cummings**

Mailing Address 87 Lawton Road

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cummings Insurance Co.Occupation  
Owner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 25    |   | 2014        |

Transaction ID : SA11AI.58726

Amount of Each Receipt this Period

100.00

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

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

400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Neal F. Cunningham**

Mailing Address 61 Pershing Road

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BES-CUT, Inc.

Occupation

Systems Manager

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

725.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58197

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Neal F. Cunningham**

Mailing Address 61 Pershing Road

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BES-CUT, Inc.

Occupation

Systems Manager

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

775.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 29    |   | 2014      |

Transaction ID : SA11AI.58984

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Stephen B. Delaney**

Mailing Address 41 Middlefield Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Connecticut

Occupation

Worker's Compensation Commissioner

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58405

Amount of Each Receipt this Period

250.00

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

350.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Nuala E. Droney

Mailing Address 51 Lemay Street

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinson & Cole LLPOccupation  
Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 14  |   | 2014    |

Transaction ID : SA11AI.58744

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. John F. Droney Jr.

Mailing Address 75 Rockledge Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinckley AllenOccupation  
Attorney

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58392

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. John F. Droney Jr.

Mailing Address 75 Rockledge Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinckley AllenOccupation  
Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 14  |   | 2014    |

Transaction ID : SA11AI.58747

Amount of Each Receipt this Period

100.00

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

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

550.00



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

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

FOR LINE NUMBER:

PAGE 17 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert Duffy

A.

Mailing Address 16 Longview Road

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UTC - Sikorsky

Occupation

VP - HR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 26    |   | 2014      |

Transaction ID : SA11AI.58995

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

David K. Emmel

B.

Mailing Address 28 Henderson Drive

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Physician

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 17    |   | 2014      |

Transaction ID : SA11AI.58460

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Stephanie S. Farber PhD.

C.

Mailing Address 14 Ozone Road

City

Branford

State

CT

Zip Code

06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 26    |   | 2014      |

Transaction ID : SA11AI.58997

Amount of Each Receipt this Period

250.00

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

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

850.00

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael G. Farina

A.

Mailing Address 27 Huntington Street

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Yale University

Occupation

Italian Professor

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2199.78

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 29    |   | 2014      |

Transaction ID : SA11AI.58287

Amount of Each Receipt this Period

36.00

Full Name (Last, First, Middle Initial)

Toni M. Fatone

B.

Mailing Address 100 Ferncliff Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TMF Consulting Services, LLC

Occupation

Healthcare Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

900.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 14    |   | 2014      |

Transaction ID : SA11AI.58816

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Lynn Ferrari

C.

Mailing Address 33 Charter Oak Place

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☒ Other (specify)

General Convention

Election Cycle-to-Date

210.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58209

Amount of Each Receipt this Period

75.00

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

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

611.00

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Ann E. Flanagan

Mailing Address 241 21 South Water Street

City

East Windsor

State

CT

Zip Code

06088

FEC ID number of contributing  
federal political committee.

C

Name of Employer

East Hartford Board of Ed.

Occupation

Supervisor/Teacher Education

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

275.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58491

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Richard A. Fracasso

Mailing Address 193 Dayl Drive

City

Kensington

State

CT

Zip Code

06037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

485.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58316

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Richard A. Fracasso

Mailing Address 193 Dayl Drive

City

Kensington

State

CT

Zip Code

06037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

665.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 25    |   | 2014        |

Transaction ID : SA11AI.58719

Amount of Each Receipt this Period

180.00

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

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

330.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Robert S. Frank****A.**

Mailing Address 1 Gold Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 28    |   | 2014        |

**Transaction ID : SA11AI.58165**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Susan Freedman****B.**

Mailing Address 213 Tryon St

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin

Occupation

Attorney

Receipt For: 2014

☐

Primary

☒

General

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 09    |   | 2014        |

**Transaction ID : SA11AI.58915**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Judith C. Friedman****C.**

Mailing Address 101 Lawton Road

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Author

Receipt For: 2014

☐

Primary

☒

General

Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 17    |   | 2014        |

**Transaction ID : SA11AI.58658**

Amount of Each Receipt this Period

200.00

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

700.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Kelly Ramsey Fuhlbrigge

Mailing Address 34 Ellsworth Lane

City  
EllingtonState  
CTZip Code  
06029FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Conn. Credit Union LeagueOccupation  
Vice President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 14    |   | 2014      |

Transaction ID : SA11AI.58764

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Timothy J. Gamache

Mailing Address 79 Cypress Street

City  
BristolState  
CTZip Code  
06010FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 20    |   | 2014      |

Transaction ID : SA11AI.58447

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jeffrey A. Gebrian

Mailing Address 60 Sunrise Hill Road

City  
West HartfordState  
CTZip Code  
06107FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CR3 Inc.Occupation  
Landscaping

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

260.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 14    |   | 2014      |

Transaction ID : SA11AI.58494

Amount of Each Receipt this Period

50.00

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

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

250.00

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Elliot Ginsberg

Mailing Address 22 Stuart Drive

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Conn. Center for Adv. Technolo

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58796

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Nicholas P. Giordano

Mailing Address 8509 Sparger Street

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ernst &amp; Young LLP

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

2000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2014        |

Transaction ID : SA11AI.58110

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Paul T. Glover

Mailing Address 648 Fern Street

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

2175.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58305

Amount of Each Receipt this Period

1000.00

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

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

2050.00

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

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

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Paul T. Glover

Mailing Address 648 Fern Street

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2425.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2014        |

Transaction ID : SA11AI.58981

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Betty Ann Grady

Mailing Address 15 Staples Place

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58489

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Arnold Greenberg

Mailing Address 65 Westwood Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Private investor

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58404

Amount of Each Receipt this Period

250.00

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

750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Arnold Greenberg**

Mailing Address 65 Westwood Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Private investor

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 27    |   | 2014      |

Transaction ID : SA11AI.58679

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Jam Griffin**

Mailing Address 1040 Farmington Avenue

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58206

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Samuel C. Hamilton**

Mailing Address 309 Kennedy Road

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEDCO

Occupation

Executive Director/CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1600.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 26    |   | 2014      |

Transaction ID : SA11AI.58707

Amount of Each Receipt this Period

500.00

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

1500.00

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



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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael J. Hanley

A.

Mailing Address 349 East Street

City

Hebron

State

CT

Zip Code

06248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Non-Profit Consultant

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58400

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Susan Hays

B.

Mailing Address 104 Oakwood Avenue

City

West Hartford

State

CT

Zip Code

06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Udipe, Kelly &amp; Spellacy, P.C.

Occupation

Attorney

Receipt For: 2014

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58856

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Julian Haywood

C.

Mailing Address 502 H Street, SW

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Heather Podesta + Partners

Occupation

Lobbyist

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58312

Amount of Each Receipt this Period

500.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mary M. Heslin**

Mailing Address 235 Kenyon Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 05  |   | 2014    |

Transaction ID : SA11AI.58872

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Jeffrey S. Hoffman**

Mailing Address Connecticut Boulevard

City

East Hartford

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hoffman Enterprises

Occupation

Executive

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58226

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**David W. Horvitz**

Mailing Address 401 E. Las Olas Blvd

City

Ft. Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WLD Enterprises, Inc.

Occupation

Investor

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58221

Amount of Each Receipt this Period

1000.00

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

2100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Francie Horvitz****A.**

Mailing Address 1700 SE 4th St

City

Ft. Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Artist

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

**Transaction ID : SA11AI.58219**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Irish American Political Partnership****B.**

Mailing Address 52 Ridge Road

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 14  |   | 2014    |

**Transaction ID : SA11AI.58663**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Harry T. James****C.**

Mailing Address 1227 Burnside Avenue

City

East Hartford

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

H&amp;J Contractors

Occupation

Owner

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

**Transaction ID : SA11AI.58519**

Amount of Each Receipt this Period

2600.00

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

3900.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Mary B. Jason

Mailing Address 417 Mountain Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58414

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. John S. Johnson

Mailing Address 12 Tantummaheag Road

City

Old Lyme

State

CT

Zip Code

06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thames River Properties, LLC

Occupation

Real Estate

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58199

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Caren A. Kittredge

Mailing Address 52 Morgan Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UTC

Occupation

Marketing

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58743

Amount of Each Receipt this Period

250.00

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

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

600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Paul A. Klager**

Mailing Address 11 David Drive

City

East Windsor

State

CT

Zip Code

06088

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bacon & Wilson, P.C.Occupation  
Administrator

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 25    |   | 2014        |

Transaction ID : SA11AI.58732

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Daniel E. Kleinman**

Mailing Address 6 Dogwood Lane

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Levy & Droney P.C.Occupation  
Attorney

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58395

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**William Kleinman**

Mailing Address 35 Juniper Lane

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCONN Helth CenterOccupation  
Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 15    |   | 2014        |

Transaction ID : SA11AI.58292

Amount of Each Receipt this Period

250.00

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

800.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Simon Konover**

Mailing Address 401 E. Linton Blvd.

City

Delray Beach

State

FL

Zip Code

33483

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

Transaction ID : SA11AI.58225

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Cheryl Kozak**

Mailing Address 31 Hunters Ridge

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Travelers

Occupation

HR Executive

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 14 / 2014

Transaction ID : SA11AI.58755

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Sycuan Band of the Kumeyaay Nation**

Mailing Address 5459 Sycuan Road

City

El Cajon

State

CA

Zip Code

92019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11AI.58176

Amount of Each Receipt this Period

100.00

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

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

1200.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

|   |  |  |   |
|---|--|--|---|
| <b>A. Sycuan Band of the Kumeyaay Nation</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5459 Sycuan Road<br>City El Cajon State CA Zip Code 92019<br>FEC ID number of contributing federal political committee. C<br>Name of Employer N/A Occupation N/A<br>Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)<br>Election Cycle-to-Date 5000.00                      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 08 / 2014<br><b>Transaction ID : SA11AI.58177</b><br>Amount of Each Receipt this Period<br>2400.00 |
| <b>B. Ruth A. Kurien</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 190 Woodpond Road<br>City West Hartford State CT Zip Code 06107<br>FEC ID number of contributing federal political committee. C<br>Name of Employer Matthew Dallas Gordon, LLC Occupation Attorney<br>Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)<br>Election Cycle-to-Date 300.00         |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 14 / 2014<br><b>Transaction ID : SA11AI.58825</b><br>Amount of Each Receipt this Period<br>100.00  |
| <b>C. Christopher R. Larson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 6 Oakmoore Drive<br>City Poquoson State VA Zip Code 23662<br>FEC ID number of contributing federal political committee. C<br>Name of Employer Delaware Resource Authority Occupation DOD Contractor<br>Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)<br>Election Cycle-to-Date 300.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 27 / 2014<br><b>Transaction ID : SA11AI.58516</b><br>Amount of Each Receipt this Period<br>100.00  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....   |  |  | 2600.00   |
| <b>TOTAL</b> This Period (last page this line number only).....   |  |  |   |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Christopher R. Larson**

Mailing Address 6 Oakmoore Drive

City

Poquoson

State

VA

Zip Code

23662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Delaware Resource Authority

Occupation

DOD Contractor

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 27  |   | 2014    |

Transaction ID : SA11AI.58517

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Marc S. Levine**

Mailing Address 30 Fawn Brook Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mark S. Levine Real Estate Interests

Occupation

Principal

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

1250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58394

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Coleman B. Levy**

Mailing Address 74 Batterson Park Road

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hinckley Allen and Snyder LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58402

Amount of Each Receipt this Period

500.00

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

850.00

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



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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Alan E. Lieberman

Mailing Address 91 Old Farms Road

City

West Simsbury

State

CT

Zip Code

06092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shipman & GoodwinOccupation  
Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 09  |   | 2014    |

Transaction ID : SA11AI.58906

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. CT Assets LLC

Mailing Address 34 Tamarac Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
n/a

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2014    |

Transaction ID : SA11AI.58502

Amount of Each Receipt this Period

250.00

LLC taxed as partnership. See attribution below.

Full Name (Last, First, Middle Initial)

C. James Macchio

Mailing Address 34 Tamarac Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT Assets, LLCOccupation  
Owner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2014    |

Transaction ID : SA11AI.58502.0

Amount of Each Receipt this Period

250.00

Attribution from CT Assets, LLC

[MEMO ITEM]

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

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

550.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.****Ann M. Long**

Mailing Address 30 Old Mill Court

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Francis Hospital and Med

Occupation

RN

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 14    |   | 2014        |

**Transaction ID : SA11AI.58832**

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

**Michael T. Long**

Mailing Address 8 Erin's Way

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1550.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 28    |   | 2014        |

**Transaction ID : SA11AI.58368**

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

**Gerard M. Lupacchino**

Mailing Address 33 Comstock Road

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Korn Ferry International

Occupation

Senior Partner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 28    |   | 2014        |

**Transaction ID : SA11AI.58369**

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

585.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58201

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

620.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 02    |   | 2014        |

Transaction ID : SA11AI.58279

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

720.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58766

Amount of Each Receipt this Period

100.00

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

170.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Judith Lyons

A.

Mailing Address 62 Cumberland Street

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 03    |   | 2014      |

Transaction ID : SA11AI.58355

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Judith Lyons

B.

Mailing Address 62 Cumberland Street

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

525.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 23    |   | 2014      |

Transaction ID : SA11AI.58964

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

Carolyn J. Malon

C.

Mailing Address 11 Mountain Terrace

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Dentist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

375.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 18    |   | 2014      |

Transaction ID : SA11AI.58421

Amount of Each Receipt this Period

50.00

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

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

275.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Joyce D. Mandell****A.**

Mailing Address 51 Mountain Farms Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Data Mail

Occupation

Secretary

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 14    |   | 2014      |

**Transaction ID : SA11AI.58520**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Bruce A. Maneeley****B.**

Mailing Address 65 Rye Street

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Maneeley's Banquet Facility

Occupation

Owner

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 23    |   | 2014      |

**Transaction ID : SA11AI.58965**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Frank Manganaro****C.**

Mailing Address 135 Cambridge Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Mgmt./Tech. consultant

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

275.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 14    |   | 2014      |

**Transaction ID : SA11AI.58297**

Amount of Each Receipt this Period

75.00

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

3675.00

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

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

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

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Frank Manganaro

Mailing Address 135 Cambridge Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Mgmt./Tech. consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 19    |   | 2014        |

Transaction ID : SA11AI.59003

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

William J. McCue

Mailing Address 140 Elbridge Road

City

New Britain

State

CT

Zip Code

06052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McCue Mortgage Company

Occupation

Mortgage Banker

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58860

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Patience McDowell

Mailing Address 45 Woodside Circle

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
☐ Convention

Election Cycle-to-Date

650.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58399

Amount of Each Receipt this Period

250.00

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

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

875.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

|  |   |  |  |
|--|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>Mary McKone</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 05 / 2014 |  |
| Mailing Address 26 Braeburn Road   |   | <b>Transaction ID : SA11AI.58868</b>                     |  |
| City<br>West Hartford  | State<br>CT                               | Zip Code<br>06107  | Amount of Each Receipt this Period<br>100.00 |
| FEC ID number of contributing federal political committee.<br>C  |   |  |  |
| Name of Employer<br>Retired  | Occupation<br>Retired                     |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | Election Cycle-to-Date<br>300.00          |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>David J. McQuade</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 12 / 2014 |  |
| Mailing Address 20-13 Whitney Ferguson Road  |   | <b>Transaction ID : SA11AI.58391</b>                     |  |
| City<br>Vernon   | State<br>CT                               | Zip Code<br>06066  | Amount of Each Receipt this Period<br>250.00 |
| FEC ID number of contributing federal political committee.<br>C  |   |  |  |
| Name of Employer<br>Murtha Cullina LLP   | Occupation<br>Consultant                  |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date<br>1000.00         |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>J. Michael McQuade</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 08 / 2014 |  |
| Mailing Address 94 Vermillion Drive  |   | <b>Transaction ID : SA11AI.58486</b>                     |  |
| City<br>Avon   | State<br>CT                               | Zip Code<br>06001  | Amount of Each Receipt this Period<br>100.00 |
| FEC ID number of contributing federal political committee.<br>C  |   |  |  |
| Name of Employer<br>United Technologies  | Occupation<br>SVP, Science and Technology |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date<br>2600.00         |  |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....  |   | 450.00   |  |
| <b>TOTAL</b> This Period (last page this line number only).....  |   |  |  |

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

Use separate schedule(s)  
for each category of the  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Sharon A. Melodia

Mailing Address 188 Minna Street #29F

City

San Francisco

State

CA

Zip Code

94105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 02  |   | 2014    |

Transaction ID : SA11AI.58167

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Kevin F. Morgan

Mailing Address 54 Split Oak Circle

City

Chesterfield

State

NH

Zip Code

03443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GeoVisionsOccupation  
CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58320

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Margaret L. Morton

Mailing Address 369 Pine Street

City

Middletown

State

CT

Zip Code

06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northeast UtilitiesOccupation  
Vice President - Govt. Affairs

Receipt For: 2014

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 05  |   | 2014    |

Transaction ID : SA11AI.58867

Amount of Each Receipt this Period

250.00

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

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

1000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**John Motley**

Mailing Address 21 Temple Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MotleyBeup, LLP

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 29    |   | 2014      |

Transaction ID : SA11AI.58986

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Scott L. Murphy**

Mailing Address 29 Eastern Drive

City

Wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 09    |   | 2014      |

Transaction ID : SA11AI.58902

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Denise L. Nappier**

Mailing Address 110 Westerly Terrace

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Connecticut

Occupation

Treasurer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 14    |   | 2014      |

Transaction ID : SA11AI.58757

Amount of Each Receipt this Period

100.00

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

1100.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Jerry Neuwirth MD**

Mailing Address 19 Brookside Blvd.

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retina Consultants

Occupation

Physician

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 17    |   | 2014        |

Transaction ID : SA11AI.58462

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Kent S. Nevins**

Mailing Address 14 Eastwood Road

City

Norwalk

State

CT

Zip Code

06851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin, LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 23    |   | 2014        |

Transaction ID : SA11AI.58967

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. James F. Noonan Jr.**

Mailing Address P. O. Box 372

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Connecticut

Occupation

State Marshall

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

275.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 21    |   | 2014        |

Transaction ID : SA11AI.58923

Amount of Each Receipt this Period

100.00

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

600.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Richard Nunez

A.

Mailing Address 9982 Torino Drive

City

Lake Worth

State

FL

Zip Code

33467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Developer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 28    |   | 2014      |

Transaction ID : SA11AI.58988

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

Lawrence O'Brien

B.

Mailing Address 3410 Que Street

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The OBC Group, LLC

Occupation

Partner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 24    |   | 2014      |

Transaction ID : SA11AI.59099

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

David W. O'Leary

C.

Mailing Address 619 Willow Street

City

Waterbury

State

CT

Zip Code

06710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robinson &amp; Cole

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
☐ Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58410

Amount of Each Receipt this Period

250.00

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

2250.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mary L. Onidi**

Mailing Address 61 Huckleberry Road

City

East hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Marsh USA, Inc.

Occupation

Insurance

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58760

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Andrew J. Packer**

Mailing Address 42 Goodwin Circle

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retina Consultants PC

Occupation

Ophthalmologist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 17    |   | 2014        |

Transaction ID : SA11AI.58459

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Peter Parrotta**

Mailing Address 177 Stone Hill Drive

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parrotta Management Company LL

Occupation

Property Management

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2014        |

Transaction ID : SA11AI.59068

Amount of Each Receipt this Period

125.00

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

725.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

William R. Peelle Jr.

A.

Mailing Address 32 Orchard Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Morgan Stanley Smith Barney

Occupation

Executive

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58385

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

William R. Peelle Jr.

B.

Mailing Address 32 Orchard Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Morgan Stanley Smith Barney

Occupation

Executive

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58390

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Edward Peltier

C.

Mailing Address 4 Hunter Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American School for the Deaf

Occupation

Executive Director

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

800.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58387

Amount of Each Receipt this Period

250.00

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

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

750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Daniel E. Petashnick****A.**

Mailing Address 496 Foote Road

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Manchester Ophthalmology

Occupation

Ophthalmologist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 17    |   | 2014        |

**Transaction ID : SA11AI.58467**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Marilyn J. Pillion****B.**

Mailing Address 745 Main Street

City

East Hartford

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

260.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 27    |   | 2014        |

**Transaction ID : SA11AI.58682**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Lindsey Pinkham****C.**

Mailing Address 10 Waterside Drive

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Conn. Bankers Association

Occupation

President and CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

**Transaction ID : SA11AI.58871**

Amount of Each Receipt this Period

500.00

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

1100.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

James A. Plumridge

Mailing Address 50 Church Street

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014



Primary



General



Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58205

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Paul S. Polo

Mailing Address 203 Seaside Avenue

City

Westbrook

State

CT

Zip Code

06498

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AdChem Mfg. Tech., Inc.

Occupation

Sales/Owner

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1425.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 13    |   | 2014      |

Transaction ID : SA11AI.58810

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

George C. Prouty Jr.

Mailing Address PO Box 481

City

Berlin

State

CT

Zip Code

06037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arthur Shuster, Inc.

Occupation

Senior VP

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 05    |   | 2014      |

Transaction ID : SA11AI.58876

Amount of Each Receipt this Period

250.00

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

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

850.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Joseph P. Quinn, Jr.

Mailing Address 1173 Farmington Avenue

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Furniss &amp; Quinn P.C.

Occupation

Attorney

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Transaction ID : SA11AI.58311

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Margaret G. Ramsey

Mailing Address 7 Winterbourne View

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bradley, Foster &amp; Sargent

Occupation

Portfolio Assistant

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 14  |   | 2014    |

Transaction ID : SA11AI.58827

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Raymond N. Ramsey

Mailing Address 7 Winterbourne View

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 23  |   | 2014    |

Transaction ID : SA11AI.58377

Amount of Each Receipt this Period

50.00

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

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

|        |
|--------|
| 225.00 |
|--------|



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

Use separate schedule(s)  
for each category of the  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ethal Ratner

Mailing Address 275 Steele Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58222

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Readco, LLC

Mailing Address 6 Vista Drive

City

Old Lyme

State

CT

Zip Code

06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 07  |   | 2014    |

Transaction ID : SA11AI.58155

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Dr. Pamela T. Reid

Mailing Address 27 Buckingham Lane

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Joseph College

Occupation

President

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 14  |   | 2014    |

Transaction ID : SA11AI.58761

Amount of Each Receipt this Period

500.00

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

4000.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Belle K. Ribicoff

A.

Mailing Address 81 Bloomfield Avenue

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 28  |   | 2014    |

Transaction ID : SA11AI.58166

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

John Rimscha

B.

Mailing Address 1 Gold Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Real Estate

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58386

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

Kevin J. Riordan

C.

Mailing Address 655 15th Street NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wellpoint

Occupation

Regional Vice President

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 08  |   | 2014    |

Transaction ID : SA11AI.58178

Amount of Each Receipt this Period

1000.00

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

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

1375.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Richard N. Riscassi**

Mailing Address 165 Garfield Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Riscassi &amp; Davis

Occupation

Attorney

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

375.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58403

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Albert Rizzo Jr.**

Mailing Address 388 Stamm Road

City

Newington

State

CT

Zip Code

06111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rizzo Pool

Occupation

Owner

Receipt For: 2014

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 05    |   | 2014      |

Transaction ID : SA11AI.58275

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Amy Roberti**

Mailing Address 801 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Procter &amp; Gamble

Occupation

Government Relations

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 13    |   | 2014      |

Transaction ID : SA11AI.58314

Amount of Each Receipt this Period

2400.00

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

2750.00

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amy Roberti

Mailing Address 801 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Procter &amp; Gamble

Occupation

Government Relations

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 13    |   | 2014        |

Transaction ID : SA11AI.59113

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Patricia E. Rodgers

Mailing Address 1909 Main Street

City

East Hartford

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Murtha Cullina LLP

Occupation

Paralegal

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58776

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Gerald A. Roisman

Mailing Address 164 Beacon Hill Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Roisman &amp; McClure

Occupation

Attorney

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 08    |   | 2014        |

Transaction ID : SA11AI.58485

Amount of Each Receipt this Period

250.00

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

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

500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Craig A. Roncaioli**

Mailing Address 326 North Quaker Lane

City

West Hartford

State

CT

Zip Code

06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Broadway Financial

Occupation

Financial Planner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2014        |

Transaction ID : SA11AI.58432

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Peter M. Rosa**

Mailing Address 13 Cavendish Place

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Foun. for Public Givi

Occupation

Officer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 25    |   | 2014        |

Transaction ID : SA11AI.58712

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Barbara-Ann Rossi**

Mailing Address 21 Jerry Road

City

East Hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

325.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 13    |   | 2014        |

Transaction ID : SA11AI.58792

Amount of Each Receipt this Period

50.00

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

400.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

David M. Roth

Mailing Address 50 Whetten Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Levy &amp; Droney

Occupation

Attorney

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58218

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Emily C. Roth

Mailing Address 50 Whetten Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 22    |   | 2014      |

Transaction ID : SA11AI.58359

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Linda H. Roth

Mailing Address 50 Whetten Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wadsworth Antheneum

Occupation

Curator

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 12    |   | 2014      |

Transaction ID : SA11AI.58217

Amount of Each Receipt this Period

1000.00

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

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

2500.00

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Rosalie B. Roth

Mailing Address 79 Bloomfield Avenue

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VNA Healthcare

Occupation

Development Officer

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 28  |   | 2014    |

Transaction ID : SA11AI.58164

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Stephen Roth

Mailing Address 50 Whetten Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WLD Enterprises

Occupation

Intern

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58416

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. James M. Ruel

Mailing Address 38 Enrico Road

City

Bolton

State

CT

Zip Code

06043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Financial Services

Occupation

Executive

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

Transaction ID : SA11AI.59235

Amount of Each Receipt this Period

20.00

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

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

770.00

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Patricia Marie Russo****A.**

Mailing Address 191 Smith Ridge Road

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

**Transaction ID : SA11AI.58308**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**James P. Sandler****B.**

Mailing Address 800 Cottage Grove Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sandler &amp; Mara, P.C.

Occupation

Attorney

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

550.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

**Transaction ID : SA11AI.58406**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Paul D. Sanson****C.**

Mailing Address 26 Midlands Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin

Occupation

Attorney

Receipt For: 2014

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 09  |   | 2014    |

**Transaction ID : SA11AI.58913**

Amount of Each Receipt this Period

250.00

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

1000.00



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

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

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sarah E. Schenk

Mailing Address 15 West Lane

City

Stamford

State

CT

Zip Code

05905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Rentry

Occupation

Board President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 27    |   | 2014        |

Transaction ID : SA11AI.58677

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Anita Schepker

Mailing Address 115 Mountain Terrace Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58758

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Stephen G. Schoen

Mailing Address 5621 SW 69th Ave

City

Coral Gables

State

FL

Zip Code

33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MDR Associates

Occupation

Health Care Consultant

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
☐ Convention

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58223

Amount of Each Receipt this Period

1000.00

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

3000.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Katherine M. Scierka**

Mailing Address 157 Bradford Walk

City

New Britain

State

CT

Zip Code

06053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McCue Mortgage

Occupation

Banking

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58878

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Naseem Shaikh**

Mailing Address 52 Bridgewater Drive

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

United Technologies

Occupation

VP Finance

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2014        |

Transaction ID : SA11AI.58975

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Ann E. Sheffer**

Mailing Address 19 Stony Point Road

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1750.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2014        |

Transaction ID : SA11AI.58979

Amount of Each Receipt this Period

500.00

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

1500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Arshi Siddiqui

Mailing Address 1515 15th St NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Akin Gump Strauss Hauer &amp; Feld

Occupation

Attorney

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1750.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2014    |

Transaction ID : SA11AI.58129

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

B. Nancy Silvers

Mailing Address 61 Ledyard Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Homemaker

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

2600.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 13  |   | 2014    |

Transaction ID : SA11AI.58318

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Robert R. Simpson

Mailing Address 902 Sand Stone Drive

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin, LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 23  |   | 2014    |

Transaction ID : SA11AI.58966

Amount of Each Receipt this Period

250.00

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

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

4100.00

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

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

FOR LINE NUMBER:

PAGE 60 OF 173

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Shirley W. Steinmetz

Mailing Address 375 Brimfield Road

City

Wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

325.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2014        |

Transaction ID : SA11AI.58692

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

Robert Stern

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2014        |

Transaction ID : SA11AI.58699

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Marion J. Stoj MD

Mailing Address 191 Main Street

City

Manchester

State

CT

Zip Code

06042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Ophthalmologist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 17    |   | 2014        |

Transaction ID : SA11AI.58461

Amount of Each Receipt this Period

250.00

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

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

475.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Michael Suisman**

Mailing Address 48 Orchard Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Danny Corp.

Occupation

President

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58382

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**James J. Szerejko**

Mailing Address 15 Thicket Lane

City

West hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halloran &amp; Sage LLP

Occupation

Attorney

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 12    |   | 2014        |

Transaction ID : SA11AI.58396

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Allan B. Taylor**

Mailing Address 238 Whitney Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

City of Hartford

Occupation

Attorney

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2014        |

Transaction ID : SA11AI.58310

Amount of Each Receipt this Period

250.00

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

625.00

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

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

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

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Gordon Taylor

Mailing Address 5049 Cathedral Ave NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ogilvy Government Relations

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 27    |   | 2014        |

Transaction ID : SA11AI.58992

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Joy L. Tomasso

Mailing Address 132 Roslyn Drive

City

New Britain

State

CT

Zip Code

06052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58866

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Michael W. Tomasso

Mailing Address 1 Elton Place

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tomasso Brothers, Inc.

Occupation

Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58862

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

|  |                                   |  |   |
|--|-----------------------------------|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>William A. Tomasso</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 05 / 2014 |   |
| Mailing Address 111 Kent Road  |                                   | <b>Transaction ID : SA11AI.58863</b>                     |   |
| City<br>New Britain  | State<br>CT                       | Zip Code<br>06052  | Amount of Each Receipt this Period<br>500.00  |
| FEC ID number of contributing federal political committee.<br>C  |                                   | Amount of Each Receipt this Period<br>500.00             |   |
| Name of Employer<br>WTP, LLC   | Occupation<br>Executive           |  |   |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | Election Cycle-to-Date<br>500.00  |  |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>Angelo Tomasso Jr.</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 05 / 2014 |   |
| Mailing Address 132 Roslyn Drive   |                                   | <b>Transaction ID : SA11AI.58864</b>                     |   |
| City<br>New Britain  | State<br>CT                       | Zip Code<br>06052  | Amount of Each Receipt this Period<br>500.00  |
| FEC ID number of contributing federal political committee.<br>C  |                                   | Amount of Each Receipt this Period<br>500.00             |   |
| Name of Employer<br>None   | Occupation<br>Retired             |  |   |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | Election Cycle-to-Date<br>500.00  |  |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>Gail Tomberg</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 14 / 2014 |   |
| Mailing Address 5 Stonebrook Lane  |                                   | <b>Transaction ID : SA11AI.58499</b>                     |   |
| City<br>Cos Cob  | State<br>CT                       | Zip Code<br>06807  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C  |                                   | Amount of Each Receipt this Period<br>1000.00            |   |
| Name of Employer<br>Self-employed  | Occupation<br>Realtor             |  |   |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date<br>1000.00 |  |   |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....  |                                   | 2000.00  |   |
| <b>TOTAL</b> This Period (last page this line number only).....  |                                   |  |   |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Thomas J. Tyler**

Mailing Address 18 Bridge Lane

City

Enfield

State

CT

Zip Code

06082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tyler &amp; Tyler

Occupation

Attorney

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 2 |   | 2 | 0 | 1 | 4 |

Transaction ID : SA11AI.58412

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Nancy Van Duyne**

Mailing Address 4901 MacArthur Blv NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

United Airlines

Occupation

VP, Congressional Affairs

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 3 |   | 2 | 0 | 1 | 4 |

Transaction ID : SA11AI.58331

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**James A. Wade**

Mailing Address 39 Pinnacle Mountain Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robinson &amp; Cole

Occupation

Attorney

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 2 |   | 2 | 0 | 1 | 4 |

Transaction ID : SA11AI.58397

Amount of Each Receipt this Period

250.00

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

750.00

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



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

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

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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

William J. Wade Jr.

A.

Mailing Address 100 Wells Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Burner

Occupation

Principal

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 25  |   | 2014    |

Transaction ID : SA11AI.58722

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Michael J. Walsh

B.

Mailing Address 18 Pent Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Walsh Woodard, LLC

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 05  |   | 2014    |

Transaction ID : SA11AI.58873

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Hans Weiss

C.

Mailing Address 138 Oakland Street

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2014    |

Transaction ID : SA11AI.58436

Amount of Each Receipt this Period

125.00

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

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

1625.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Ralph Wentworth**

Mailing Address 12 Stuart Drive

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wentworth/DeAngelis

Occupation

Insurance Agent

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Transaction ID : SA11AI.58401

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Michael L. Widland**

Mailing Address 42 Trails End Rd.

City

Weston

State

CT

Zip Code

06883

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shipman & Goodwin

Occupation

Attorney

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 09  |   | 2014    |

Transaction ID : SA11AI.58909

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Gregory S. Wolff**

Mailing Address 16 Jonathan Drive

City

Ellington

State

CT

Zip Code

06079

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Insurance

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 28  |   | 2014    |

Transaction ID : SA11AI.58163

Amount of Each Receipt this Period

250.00

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

750.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

D. Lincoln Woodard

A.

Mailing Address 525 Chestnut Hill Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Moukawsher &amp; Walsh LLC

Occupation

Litigation Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

Transaction ID : SA11AI.58869

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Robert Wyld

B.

Mailing Address P.O. Box 279

City

West Simsbury

State

CT

Zip Code

06092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 09    |   | 2014        |

Transaction ID : SA11AI.58917

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Amount of Each Receipt this Period

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

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

750.00

79231.00

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

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AETNA INC POLITICAL ACTION COMMITTEE (FKA AETNA LIFE AND CASUALTY...)

**A.**

Mailing Address 151 FARMINGTON AVENUE

151 FARMINGTON AVE.

City

HARTFORD

State

CT

Zip Code

06156

FEC ID number of contributing  
federal political committee.

**C** C00181826

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11C.58478

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

AETNA INC POLITICAL ACTION COMMITTEE (FKA AETNA LIFE AND CASUALTY...)

**B.**

Mailing Address 151 FARMINGTON AVENUE

151 FARMINGTON AVE.

City

HARTFORD

State

CT

Zip Code

06156

FEC ID number of contributing  
federal political committee.

**C** C00181826

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11C.59272

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

AIRCRAFT OWNERS AND PILOTS ASSOCIATION (POLITICAL ACTION COMMITTEE)

**C.**

Mailing Address 421 AVIATION WAY

City

FREDERICK

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.

**C** C70004585

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11C.59069

Amount of Each Receipt this Period

1500.00

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

6500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Ave NW

Suite 400W

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00089136

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 30    |   | 2014      |

Transaction ID : SA11C.58686

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**AMBULATORY SURGERY CENTER ASSOCIATION PAC (ASCPAC)**

Mailing Address 1012 CAMERON STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00424788

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General

Convention

Election Cycle-to-Date

2500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 14    |   | 2014      |

Transaction ID : SA11C.58510

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE ('OPHTHPAC')**

Mailing Address 655 BEACH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94109

FEC ID number of contributing  
federal political committee.**C** C00196246

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 17    |   | 2014      |

Transaction ID : SA11C.58457

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE ('OPHTHPAC')

**A.** Mailing Address 655 BEACH STREET

City State Zip Code  
SAN FRANCISCO CA 94109

FEC ID number of contributing  
federal political committee.

**C** C00196246

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 17 2014

Transaction ID : SA11C.58458

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY ENT PAC

**B.** Mailing Address One Prince Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00306449

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014

Transaction ID : SA11C.58683

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**C.** AMERICAN ASSOCIATION FOR JUSTICE

Mailing Address 777 6TH STREET NW STE 200

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C70003017

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 25 2014

Transaction ID : SA11C.59079

Amount of Each Receipt this Period

1000.00

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

6500.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS**

Mailing Address 412 First Street, S.E.

Suite 12

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014

Transaction ID : SA11C.58688

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**AMERICAN BANKERS ASSOCIATION BANKPAC**

Mailing Address 1120 CONN. AVE., NW SUITE 851

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

C00004275

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 05 2014

Transaction ID : SA11C.58861

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**

Mailing Address 1015 15th St. NW

Suite 802

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

C00010868

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 26 2014

Transaction ID : SA11C.59080

Amount of Each Receipt this Period

1500.00

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

3000.00

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

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Ave., NW  
Suite 700

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00147066

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 26 2014

Transaction ID : SA11C.59081

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Ave., NW  
Suite 700

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00147066

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 26 2014

Transaction ID : SA11C.59082

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED**

Mailing Address 1625 L STREET NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00011114

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 11 2014

Transaction ID : SA11C.58657

Amount of Each Receipt this Period

1000.00

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

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

4000.00



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

Use separate schedule(s)  
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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

**A.**

Mailing Address Palladian 1

220 Leigh Farm Rd

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing  
federal political committee.

**C** C00077321

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2014

**Transaction ID : SA11C.58668**

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address Palladian 1

220 Leigh Farm Rd

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing  
federal political committee.

**C** C00077321

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 25 / 2014

**Transaction ID : SA11C.59083**

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. POLITICAL ACTION COMMITTEE (AOTPA), THE

Mailing Address 4720 Montgomery Lane

PO Box 31220

City

Bethesda

State

MD

Zip Code

20824

FEC ID number of contributing  
federal political committee.

**C** C00089086

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 02 / 2014

**Transaction ID : SA11C.58119**

Amount of Each Receipt this Period

1500.00

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

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

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION POLITICAL ACTION COMMITTEE (APAPO)

**A.**

Mailing Address PO BOX 65353

City

WASHINGTON

State

DC

Zip Code

20035

FEC ID number of contributing  
federal political committee.**C** C00522094

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 24  |   | 2014    |

**Transaction ID : SA11C.59108**

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

**AT&T CORP POLITICAL ACTION COMMITTEE (AT&T PAC)**

Mailing Address 295 NORTH MAPLE AVENUE

City

BASKING RIDGE

State

NJ

Zip Code

07920

FEC ID number of contributing  
federal political committee.**C** C00185124

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 05  |   | 2014    |

**Transaction ID : SA11C.58870**

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

**BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA**Mailing Address 600 PEACHTREE ST STE 1500  
PO BOX 40789

City

ATLANTA

State

GA

Zip Code

30308

FEC ID number of contributing  
federal political committee.**C** C00094656

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 13  |   | 2014    |

**Transaction ID : SA11C.58479**

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA**

**A.** Mailing Address **600 PEACHTREE ST STE 1500**  
**PO BOX 40789**

City State Zip Code  
**ATLANTA GA 30308**

FEC ID number of contributing  
federal political committee.

**C** **C00094656**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**6500.00**

Date of Receipt

**05 / 13 / 2014**

**Transaction ID : SA11C.58480**

Amount of Each Receipt this Period

**1500.00**

Full Name (Last, First, Middle Initial)  
**BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA**

**B.** Mailing Address **600 PEACHTREE ST STE 1500**  
**PO BOX 40789**

City State Zip Code  
**ATLANTA GA 30308**

FEC ID number of contributing  
federal political committee.

**C** **C00094656**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**8000.00**

Date of Receipt

**06 / 30 / 2014**

**Transaction ID : SA11C.59070**

Amount of Each Receipt this Period

**1500.00**

Full Name (Last, First, Middle Initial)  
**BIPARTISAN POLITICAL ACTION COMMITTEE/THE BANK OF NEW YORK MELLON CORPORATION BIPAC/BNYMC**

**C.** Mailing Address **ONE MELLON BANK CENTER**

City State Zip Code  
**PITTSBURGH PA 15258**

FEC ID number of contributing  
federal political committee.

**C** **C00017558**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**3500.00**

Date of Receipt

**06 / 30 / 2014**

**Transaction ID : SA11C.59076**

Amount of Each Receipt this Period

**1000.00**

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

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

**4000.00**

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
BLACKROCK CAPITAL MANAGEMENT INC. POLITICAL ACTION COMMITTEE (BLACKROCK PAC)

A. Mailing Address 40 EAST 52ND STREET

City State Zip Code  
NEW YORK NY 10022

FEC ID number of contributing  
federal political committee.

C C00479246

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 02 2014

Transaction ID : SA11C.58340

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. BOMBARDIER CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2200 PENNSYLVANIA AVE NW, STE 660W

City State Zip Code  
WASHINGTON DC 20037

FEC ID number of contributing  
federal political committee.

C C00546473

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 12 2014

Transaction ID : SA11C.58195

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. CHICAGO BOARD OF OPTIONS EXCHANGE INC PAC

Mailing Address 400 S. LaSalle Street

City State Zip Code  
Chicago IL 60605

FEC ID number of contributing  
federal political committee.

C C00100693

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 16 2014

Transaction ID : SA11C.58474

Amount of Each Receipt this Period

2500.00

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

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

6500.00

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

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CIGNA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address ONE LIBERTY PL

City

PHILADELPHIA

State

PA

Zip Code

19192

FEC ID number of contributing  
federal political committee.

**C** C00085316

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7268.72

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2014

Transaction ID : SA11C.58669

Amount of Each Receipt this Period

4768.72

Full Name (Last, First, Middle Initial)

**COMCAST CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 1500 Market Street  
35th Floor

City

Philadelphia

State

PA

Zip Code

19102

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11C.59071

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COMCAST CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 1500 Market Street  
35th Floor

City

Philadelphia

State

PA

Zip Code

19102

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11C.59072

Amount of Each Receipt this Period

500.00

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

6268.72

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COUNCIL OF INSURANCE AGENTS &amp; BROKERS POLITICAL ACTION COMMITTEE; THE

**A.**

Mailing Address 701 PENNSYLVANIA AVE NW SUITE 750

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 19    |   | 2014        |

**Transaction ID : SA11C.59277**

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

**COVIDIEN POLITICAL ACTION COMMITTEE (COVIDIEN PAC)**Mailing Address 900 7th Street N.W.  
Suite 975

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00433490

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

1500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 02    |   | 2014        |

**Transaction ID : SA11C.58120**

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

**COX ENTERPRISES PAC (COXPAC) INC.**Mailing Address 975 F Street, NW  
Suite 300

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00477653

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 08    |   | 2014        |

**Transaction ID : SA11C.58172**

Amount of Each Receipt this Period

2000.00

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F Street, NW

Suite 300

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

C00477653

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11C.58173

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F Street, NW

Suite 300

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

C00477653

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2014

Transaction ID : SA11C.59085

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA**

Mailing Address P O BOX 576

City

WASHINGTON

State

DC

Zip Code

20044

FEC ID number of contributing  
federal political committee.

**C**

C00007880

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11C.58174

Amount of Each Receipt this Period

2500.00

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA**

Mailing Address P O BOX 576

City State Zip Code  
WASHINGTON DC 20044

FEC ID number of contributing  
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 08 2014

Transaction ID : SA11C.58175

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)  
**DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND**

Mailing Address 1000 Darden Center Drive

City State Zip Code  
Orlando FL 32837

FEC ID number of contributing  
federal political committee.

C C00108282

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 20 2014

Transaction ID : SA11C.59273

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)  
**DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address P.O. Box 365

City State Zip Code  
Washington DC 20044

FEC ID number of contributing  
federal political committee.

C C00211318

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 13 2014

Transaction ID : SA11C.58481

Amount of Each Receipt this Period

4000.00

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

9000.00

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



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DOMINION POLITICAL ACTION COMMITTEE**Mailing Address One James River Plaza 20th Floor  
P.O. BOX 26666

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Richmond | VA    | 23261    |

FEC ID number of contributing  
federal political committee.**C** C00108209

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2014        |

**Transaction ID : SA11C.59086**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC), THE**Mailing Address 2030 Dow Center  
P.O. BOX 75000

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Midland | MI    | 48674    |

FEC ID number of contributing  
federal political committee.**C** C00074096

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 20    |   | 2014        |

**Transaction ID : SA11C.58449**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (EWPAC)**

Mailing Address ONE EDWARDS WAY

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| IRVINE | CA    | 92614    |

FEC ID number of contributing  
federal political committee.**C** C00411900

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 05    |   | 2014        |

**Transaction ID : SA11C.58670**

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND**

Mailing Address 8000 W FLORISSANT AVE

STATION 2310

City

ST. LOUIS

State

MO

Zip Code

63136

FEC ID number of contributing  
federal political committee.

**C** C00080515

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 02 / 2014

Transaction ID : SA11C.58345

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND**

Mailing Address 8000 W FLORISSANT AVE

STATION 2310

City

ST. LOUIS

State

MO

Zip Code

63136

FEC ID number of contributing  
federal political committee.

**C** C00080515

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11C.58689

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00227744

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General  
Convention

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11C.58482

Amount of Each Receipt this Period

2000.00

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

5000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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|                                    |                                     |  |                                    |                             |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ERNST & YOUNG POLITICAL ACTION COMMITTEE****A.**

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City

WASHINGTON

State

DC

Zip Code

20036

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

C00227744

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014D D / Y Y Y Y Y Y  
13 / 2014Y Y Y Y Y Y  
2014**Transaction ID : SA11C.58483**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ERNST & YOUNG POLITICAL ACTION COMMITTEE****B.**

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City

WASHINGTON

State

DC

Zip Code

20036

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

C00227744

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 16 / 2014D D / Y Y Y Y Y Y  
16 / 2014Y Y Y Y Y Y  
2014**Transaction ID : SA11C.58475**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**GENERAL CIGAR COMPANY, INC. POLITICAL ACTION COMMITTEE (GENERAL CIGAR PAC)****C.**Mailing Address 10900 NUCKOLS ROAD  
SUITE 100

City

GLEN ALLEN

State

VA

Zip Code

23060

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

C00488320

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 22 / 2014D D / Y Y Y Y Y Y  
22 / 2014Y Y Y Y Y Y  
2014**Transaction ID : SA11C.58325**

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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

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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN**

Mailing Address 3190 FAIRVIEW PARK DRIVE

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| FALLS CHURCH | VA    | 22042    |

FEC ID number of contributing federal political committee.

**C** C00078451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11C.58484

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1299 PENNSYLVANIA AVE NW STE 1100

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| WASHINGTON | DC    | 20004    |

FEC ID number of contributing federal political committee.

**C** C00024869

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

Transaction ID : SA11C.58190

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1299 PENNSYLVANIA AVE NW STE 1100

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| WASHINGTON | DC    | 20004    |

FEC ID number of contributing federal political committee.

**C** C00024869

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

Transaction ID : SA11C.58191

Amount of Each Receipt this Period

1500.00

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GENWORTH FINANCIAL INC POLITICAL ACTION COMMITTEE GENWORTH PAC**

Mailing Address 6620 W. Broad Street

City State Zip Code  
 Richmond VA 23230

FEC ID number of contributing  
federal political committee.

**C** C00404194

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

MM / DD / YYYY  
 06 / 26 / 2014

**Transaction ID : SA11C.58708**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)**

Mailing Address 7 HANOVER SQUARE  
 C/O EDWARD KANE

City State Zip Code  
 NEW YORK NY 10004

FEC ID number of contributing  
federal political committee.

**C** C00173393

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

MM / DD / YYYY  
 06 / 26 / 2014

**Transaction ID : SA11C.59087**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HUMANA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 975 F STREET, NW  
 SUITE 550

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00271007

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

MM / DD / YYYY  
 05 / 22 / 2014

**Transaction ID : SA11C.58328**

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HUMAN RIGHTS CAMPAIGN FUND**

**A.**

Mailing Address 919 18TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C70002613

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2014

**Transaction ID : SA11C.59275**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 1615 L Street NW  
Suite 900

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00032698

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2014

**Transaction ID : SA11C.59276**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**J.P. MORGAN CHASE & CO. STATE AND FEDERAL POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 270 Park Avenue 21st Floor

City

New York

State

NY

Zip Code

10017

FEC ID number of contributing  
federal political committee.

**C** C00003830

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : SA11C.58858**

Amount of Each Receipt this Period

2500.00

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

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
JOHN HANCOCK FINANCIAL SERVICES, INC FEDERAL POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 601 Congress St  
FL 13

City State Zip Code  
Boston MA 02210

FEC ID number of contributing  
federal political committee.

**C** C00137265

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 25 2014

Transaction ID : SA11C.59089

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
**JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE**

Mailing Address One Johnson & Johnson Plaza

City State Zip Code  
New Brunswick NJ 08933

FEC ID number of contributing  
federal political committee.

**C** C00010983

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 29 2014

Transaction ID : SA11C.58111

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
**KAMAN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address BLUE HILLS AVE/P O BOX 1

City State Zip Code  
BLOOMFIELD CT 06002

FEC ID number of contributing  
federal political committee.

**C** C00126847

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014

Transaction ID : SA11C.59073

Amount of Each Receipt this Period

1500.00

3500.00

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LIBERTY MUTUAL INSURANCE COMPANY-PAC**

Mailing Address 175 Berkeley Street

City State Zip Code  
Boston MA 02117

FEC ID number of contributing  
federal political committee.

**C** C00171843

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 05 2014

Transaction ID : SA11C.58672

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MARRIOTT INTERNATIONAL INC. POLITICAL ACTION COMMITTEE**

Mailing Address Marriott Drive

City State Zip Code  
Washington DC 20058

FEC ID number of contributing  
federal political committee.

**C** C00284810

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 25 2014

Transaction ID : SA11C.59091

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 2111 McDonalds Dr  
Dept 213

City State Zip Code  
OAK BROOK IL 60523

FEC ID number of contributing  
federal political committee.

**C** C00063164

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 05 2014

Transaction ID : SA11C.58875

Amount of Each Receipt this Period

1000.00

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

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

3000.00



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

Use separate schedule(s)  
for each category of the  
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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 METROPOLITAN LIFE INSURANCE COMPANY (METLIFE) EMPLOYEES' POLITICAL PARTICIPATION FUND A

**A.** Mailing Address **ONE MADISON AVENUE**

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| NEW YORK | NY    | 10010    |

FEC ID number of contributing  
federal political committee.

**C** C00040923

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 04    |   | 2014      |

Transaction ID : SA11C.58673

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)  
 METROPOLITAN LIFE INSURANCE COMPANY (METLIFE) EMPLOYEES' POLITICAL PARTICIPATION FUND A

**B.** Mailing Address **ONE MADISON AVENUE**

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| NEW YORK | NY    | 10010    |

FEC ID number of contributing  
federal political committee.

**C** C00040923

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 24    |   | 2014      |

Transaction ID : SA11C.59092

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)  
 NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

**C.** Mailing Address **1150 17TH STREET NW SUITE 701**

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| WASHINGTON | DC    | 20036    |

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 26    |   | 2014      |

Transaction ID : SA11C.59093

Amount of Each Receipt this Period

1500.00

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

5500.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

**A.**

Mailing Address 1150 17TH STREET NW SUITE 701

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 26 2014

Transaction ID : SA11C.59094

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)  
 NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

**B.**

Mailing Address 1150 17TH STREET NW SUITE 701

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 26 2014

Transaction ID : SA11C.59095

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)  
 NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

**C.**

Mailing Address 1150 17TH STREET NW SUITE 701

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 26 2014

Transaction ID : SA11C.59096

Amount of Each Receipt this Period

500.00

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

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

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

**A.**

Mailing Address 1150 17TH STREET NW SUITE 701

City

WASHINGTON

State

DC

Zip Code

20036

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

C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

9000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2014        |

**Transaction ID : SA11C.59097**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)****B.**

Mailing Address 2000 14TH STREET SUITE 450

1000 CONNECTICUT AVE, NW STE 810

City

ARLINGTON

State

VA

Zip Code

22201

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

C00283135

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General

Convention

Election Cycle-to-Date

3000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 22    |   | 2014        |

**Transaction ID : SA11C.58329**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 1922 F STREET, NW

City

WASHINGTON

State

DC

Zip Code

20006

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

C00005249

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2014        |

**Transaction ID : SA11C.59098**

Amount of Each Receipt this Period

2000.00

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

5000.00

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

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

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

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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 Executive Circle

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Irving | TX    | 75038    |

FEC ID number of contributing federal political committee.

**C** C00140061

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

MM / DD / YYYY  
05 / 22 / 2014

Transaction ID : SA11C.58357

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 1605 King Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

FEC ID number of contributing federal political committee.

**C** C00089458

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2014

Transaction ID : SA11C.58687

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION; THE (FKA NEAPAC)**

Mailing Address 1201 16TH STREET NW #421

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| WASHINGTON | DC    | 20036    |

FEC ID number of contributing federal political committee.

**C** C00003251

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

MM / DD / YYYY  
06 / 19 / 2014

Transaction ID : SA11C.58666

Amount of Each Receipt this Period

2000.00

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

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NRG ENERGY INC POLITICAL ACTION COMMITTEE**

Mailing Address 211 Carnegie Center

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.**C** C00366559

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

7000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 05    |   | 2014      |

**Transaction ID : SA11C.58674**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**OLDCASTLE MATERIALS INC PAC**Mailing Address 1420 NEW YORK AVE NW #1050  
C/O VAN SCOYOC ASSOC

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 05    |   | 2014      |

**Transaction ID : SA11C.58880**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 700 Newport Center Drive

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.**C** C00068528

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

**Transaction ID : SA11C.59101**

Amount of Each Receipt this Period

1500.00

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

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE****A.**

Mailing Address 700 Newport Center Drive

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Newport Beach | CA    | 92660    |

FEC ID number of contributing  
federal political committee.**C** C00068528

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 25    |   | 2014      |

**Transaction ID : SA11C.59102**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PG&E CORPORATION EMPLOYEES ENERGYPAC****B.**

Mailing Address 77 BEALE STREET, MAIL CODE: B29H

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| SAN FRANCISCO | CA    | 94105    |

FEC ID number of contributing  
federal political committee.**C** C00177469

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 24    |   | 2014      |

**Transaction ID : SA11C.59103**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)****C.**

Mailing Address 601 PENNSYLVANIA AVENUE NW STE 740

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| WASHINGTON | DC    | 20004    |

FEC ID number of contributing  
federal political committee.**C** C00388819

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 22    |   | 2014      |

**Transaction ID : SA11C.58330**

Amount of Each Receipt this Period

500.00

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

3500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PHOENIX COMPANIES, INC. - PAC FEDERAL, THE****A.**

Mailing Address One American Row

City

Hartford

State

CT

Zip Code

06102

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

C00168203

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 12 2014**Transaction ID : SA11C.58189**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PHOENIX COMPANIES, INC. - PAC FEDERAL, THE****B.**

Mailing Address One American Row

City

Hartford

State

CT

Zip Code

06102

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

C00168203

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014**Transaction ID : SA11C.58697**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS****C.**

Mailing Address 317 MASSACHUSETTS AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

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

C00343137

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 05 2014**Transaction ID : SA11C.58134**

Amount of Each Receipt this Period

1500.00

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

3500.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE II**

**A.**

Mailing Address 1900 K STREET NW SUITE 900

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00232173

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2014

**Transaction ID : SA11C.59274**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 711 HIGH ST/TAX DEPT

City

DES MOINES

State

IA

Zip Code

50392

FEC ID number of contributing  
federal political committee.

**C** C00128918

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : SA11C.59104**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**REALTORS POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 430 NORTH MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)

☐ General

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 07 / 2014

**Transaction ID : SA11C.58150**

Amount of Each Receipt this Period

3000.00

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

5000.00

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



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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
**SPECTRA ENERGY CORP POLITICAL ACTION COMMITTEE (SPECTRA-DCP PAC)**

Mailing Address 5400 Westheimer Court

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Houston | TX    | 77056    |

FEC ID number of contributing federal political committee.

**C** C00429662

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11C.59077

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
**SWEDISH MATCH NORTH AMERICA, INC. PAC**

Mailing Address 1021 EAST CARY STREET

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| RICHMOND | VA    | 23219    |

FEC ID number of contributing federal political committee.

**C** C00215053

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11C.58476

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF**

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 800

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20004    |

FEC ID number of contributing federal political committee.

**C** C00431361

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2014

Transaction ID : SA11C.59105

Amount of Each Receipt this Period

1500.00

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

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

3500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

A. Mailing Address 1 COCA-COLA PLAZA NW

City State Zip Code  
ATLANTA GA 30313

FEC ID number of contributing federal political committee. C C00012468

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 29 2014

Transaction ID : SA11C.58321

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)  
B. TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE (TPAC), THE

Mailing Address One Tower Square

City State Zip Code  
Hartford CT 06183

FEC ID number of contributing federal political committee. C C00376376

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 15 2014

Transaction ID : SA11C.58471

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)  
C. TYCO INTERNATIONAL MANAGEMENT COMPANY PAC

Mailing Address 9 Roszel Road

City State Zip Code  
Princeton NJ 08540

FEC ID number of contributing federal political committee. C C00113753

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☐ General  
☒ Other (specify) Convention

Election Cycle-to-Date  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 14 2014

Transaction ID : SA11C.58509

Amount of Each Receipt this Period

2500.00

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

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

11500.00

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

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

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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

|  |  |   |   |          |   |     |   |         |    |  |    |  |      |
|--|--|---|---|----------|---|-----|---|---------|----|--|----|--|------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>UBS AMERICAS FUND FOR BETTER GOVERNMENT</b>  |  | Date of Receipt<br><table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table> |   | M M      | / | D D | / | Y Y Y Y | 05 |  | 07 |  | 2014 |
| M M  | /  | D D   | /   | Y Y Y Y  |   |     |   |         |    |  |    |  |      |
| 05   |  | 07  |   | 2014     |   |     |   |         |    |  |    |  |      |
| Mailing Address 1285 AVENUE OF THE AMERICAS  |  | <b>Transaction ID : SA11C.58151</b>   |   |          |   |     |   |         |    |  |    |  |      |
| City<br>NEW YORK   | State<br>NY  | Zip Code<br>10019   | Amount of Each Receipt this Period<br><table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00  |   |     |   |         |    |  |    |  |      |
| 2500.00  |  |   |   |          |   |     |   |         |    |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00012245   |  |   |   |          |   |     |   |         |    |  |    |  |      |
| Name of Employer   | Occupation   |   |   |          |   |     |   |         |    |  |    |  |      |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date<br><table border="1"> <tr> <td>5000.00</td> </tr> </table>  |   | 5000.00   |          |   |     |   |         |    |  |    |  |      |
| 5000.00  |  |   |   |          |   |     |   |         |    |  |    |  |      |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE</b>  |  | Date of Receipt<br><table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table> |   | M M      | / | D D | / | Y Y Y Y | 06 |  | 30 |  | 2014 |
| M M  | /  | D D   | /   | Y Y Y Y  |   |     |   |         |    |  |    |  |      |
| 06   |  | 30  |   | 2014     |   |     |   |         |    |  |    |  |      |
| Mailing Address 55 Glenlake Parkway N.E.   |  | <b>Transaction ID : SA11C.59078</b>   |   |          |   |     |   |         |    |  |    |  |      |
| City<br>Atlanta  | State<br>GA  | Zip Code<br>30328   | Amount of Each Receipt this Period<br><table border="1"> <tr> <td>5000.00</td> </tr> </table> | 5000.00  |   |     |   |         |    |  |    |  |      |
| 5000.00  |  |   |   |          |   |     |   |         |    |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00064766   |  |   |   |          |   |     |   |         |    |  |    |  |      |
| Name of Employer   | Occupation   |   |   |          |   |     |   |         |    |  |    |  |      |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | Election Cycle-to-Date<br><table border="1"> <tr> <td>10000.00</td> </tr> </table> |   | 10000.00  |          |   |     |   |         |    |  |    |  |      |
| 10000.00   |  |   |   |          |   |     |   |         |    |  |    |  |      |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC</b>                      |  | Date of Receipt<br><table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table> |   | M M      | / | D D | / | Y Y Y Y | 06 |  | 30 |  | 2014 |
| M M  | /  | D D   | /   | Y Y Y Y  |   |     |   |         |    |  |    |  |      |
| 06   |  | 30  |   | 2014     |   |     |   |         |    |  |    |  |      |
| Mailing Address 9800 Fredericksburg Road<br>ROOM 501   |  | <b>Transaction ID : SA11C.58684</b>   |   |          |   |     |   |         |    |  |    |  |      |
| City<br>San Antonio  | State<br>TX  | Zip Code<br>78288   | Amount of Each Receipt this Period<br><table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00  |   |     |   |         |    |  |    |  |      |
| 2500.00  |  |   |   |          |   |     |   |         |    |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00164145   |  |   |   |          |   |     |   |         |    |  |    |  |      |
| Name of Employer   | Occupation   |   |   |          |   |     |   |         |    |  |    |  |      |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | Election Cycle-to-Date<br><table border="1"> <tr> <td>10000.00</td> </tr> </table> |   | 10000.00  |          |   |     |   |         |    |  |    |  |      |
| 10000.00   |  |   |   |          |   |     |   |         |    |  |    |  |      |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....  |  | <table border="1"> <tr> <td>10000.00</td> </tr> </table>  |   | 10000.00 |   |     |   |         |    |  |    |  |      |
| 10000.00   |  |   |   |          |   |     |   |         |    |  |    |  |      |
| <b>TOTAL</b> This Period (last page this line number only).....  |  | <table border="1"> <tr> <td></td> </tr> </table>  |   |          |   |     |   |         |    |  |    |  |      |
|  |  |   |   |          |   |     |   |         |    |  |    |  |      |

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORPORATION, POLITICAL ACTION COMMITTEE**

Mailing Address 1401 EYE STREET NW SUITE 600

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 25 2014

Transaction ID : SA11C.59106

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)  
**WAKEFERN FOOD CORP POLITICAL ACTION COMMITTEE (WAKEPAC)**

Mailing Address 33 NORTHFIELD AVENUE

City State Zip Code  
EDISON NJ 08818

FEC ID number of contributing  
federal political committee.

**C** C00489005

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 04 2014

Transaction ID : SA11C.58675

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 S.W. 8th Street

City State Zip Code  
Bentonville AR 72716

FEC ID number of contributing  
federal political committee.

**C** C00093054

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 05 2014

Transaction ID : SA11C.58676

Amount of Each Receipt this Period

2500.00

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

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

5500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 S.W. 8th Street

City

Bentonville

State

AR

Zip Code

72716

FEC ID number of contributing  
federal political committee.**C** C00093054

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

8000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 26  |   | 2014    |

**Transaction ID : SA11C.59107**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**WALGREEN CO PAC**

Mailing Address 104 WILMOT ROAD MS #1447

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing  
federal political committee.**C** C00160770

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Convention

Election Cycle-to-Date

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

**Transaction ID : SA11C.58194**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**WELLPOINT, INC. WELLPAC**

Mailing Address 120 MONUMENT CIRCLE

City

INDIANAPOLIS

State

IN

Zip Code

46204

FEC ID number of contributing  
federal political committee.**C** C00197228

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 29  |   | 2014    |

**Transaction ID : SA11C.58322**

Amount of Each Receipt this Period

2000.00

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

6000.00

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

172768.72



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

Use separate schedule(s)  
for each category of the  
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(check only one)

|                              |                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input checked="" type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                          | 14                           |  |

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Rockville Bank

Mailing Address 1009 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

707.63

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 30  |   | 2014    |

Transaction ID : SA15.58522

Amount of Each Receipt this Period

61.16

Interest

Full Name (Last, First, Middle Initial)

Rockville Bank

Mailing Address 1009 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

786.59

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 01  |   | 2014    |

Transaction ID : SA15.58521

Amount of Each Receipt this Period

78.96

Interest

Full Name (Last, First, Middle Initial)

Rockville Bank

Mailing Address 1009 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

868.09

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

Transaction ID : SA15.59224

Amount of Each Receipt this Period

81.50

Interest

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

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

221.62

221.62

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Advanced Network Strategies, LLC**

Mailing Address 236 Massachusetts Avenue, N.E.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 22220    |

Purpose of Disbursement  
Fundraising fee and expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3685.50 |
|---------|

Transaction ID : SB17.58566

**B. Advanced Network Strategies, LLC**

Mailing Address 236 Massachusetts Avenue, N.E.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 22220    |

Purpose of Disbursement  
Fundraising fee and expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 11  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 6903.33 |
|---------|

Transaction ID : SB17.59196

**C. American Express**

Mailing Address P.O. Box 114

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Service fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 7.95 |
|------|

Transaction ID : SB17.59259

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

10596.78



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 114

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Service fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 95.29 |
|-------|

Transaction ID : SB17.59266

**B. American Express**

Mailing Address P.O. Box 114

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3933.47 |
|---------|

Transaction ID : SB17.58237

**c. Peppercorn's Grill**

Mailing Address P.O. Box 776

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Plainville | CT    | 06062    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 18  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 34.72 |
|-------|

Transaction ID : SB17.58237.0

[MEMO ITEM]

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

4028.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 23  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

Transaction ID : SB17.58237.3

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 24  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 33.13 |
|-------|

Transaction ID : SB17.58237.5

**[MEMO ITEM]****c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 24  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 73.75 |
|-------|

Transaction ID : SB17.58237.6

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 25  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 141.88 |
|--------|

Transaction ID : SB17.58237.7

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 26  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 116.88 |
|--------|

Transaction ID : SB17.58237.8

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 27  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 46.00 |
|-------|

Transaction ID : SB17.58237.11

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

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|--|

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 27 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 51.00 |
|-------|

Transaction ID : SB17.58237.12

**[MEMO ITEM]****B. Westin New York Downtown**

Mailing Address 212 E 42nd Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| New York | NY    | 10017    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 28 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 339.14 |
|--------|

Transaction ID : SB17.58237.13

**[MEMO ITEM]****C. FTD**

Mailing Address 3113 Woodcreek Drive

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Downers Grove | IL    | 60515    |

Purpose of Disbursement  
Flowers

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 28 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 148.35 |
|--------|

Transaction ID : SB17.58237.14

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Westin New York Downtown**

Mailing Address 212 E 42nd Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| New York | NY    | 10017    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 29 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 12.57 |
|-------|

Transaction ID : SB17.58237.15

**[MEMO ITEM]****B. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Political meals

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 29 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 32.65 |
|-------|

Transaction ID : SB17.58237.16

**[MEMO ITEM]****c. Peppercorn's Grill**

Mailing Address P.O. Box 776

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Plainville | CT    | 06062    |

Purpose of Disbursement  
Political meals

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 30 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 24.14 |
|-------|

Transaction ID : SB17.58237.17

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Barnes & Noble**

Mailing Address 175 Glastonbury Blvd.

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Books

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 4.35 |
|------|

Transaction ID : SB17.58237.18

**[MEMO ITEM]****B. Barnes & Noble**

Mailing Address 175 Glastonbury Blvd.

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Books

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 43.04 |
|-------|

Transaction ID : SB17.58237.19

**[MEMO ITEM]****C. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 68.13 |
|-------|

Transaction ID : SB17.58237.21

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Premier Limousine**

Mailing Address 126 Kreiger Lane

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 623.88 |
|--------|

Transaction ID : SB17.58237.22

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 01  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 131.25 |
|--------|

Transaction ID : SB17.58237.23

**[MEMO ITEM]****c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 03  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 53.75 |
|-------|

Transaction ID : SB17.58237.25

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 112 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 08  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 111.88 |
|--------|

Transaction ID : SB17.58237.26

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 09  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 21.88 |
|-------|

Transaction ID : SB17.58237.27

**[MEMO ITEM]****c. RA@Rayburn**

Mailing Address Rayburn Office Building

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20515    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 20.00 |
|-------|

Transaction ID : SB17.58237.28

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Peppercorn's Grill**

Mailing Address P.O. Box 776

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Plainville | CT    | 06062    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 11  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 53.60 |
|-------|

Transaction ID : SB17.58237.29

**[MEMO ITEM]****B. The Nutshell Cafe**

Mailing Address 229 White Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06114    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 463.73 |
|--------|

Transaction ID : SB17.58237.30

**[MEMO ITEM]****C. First & Last Tavern**

Mailing Address 939 Maple Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06115    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 16  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 89.61 |
|-------|

Transaction ID : SB17.58237.31

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 114 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 114

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Service fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 27  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 7.95 |
|------|

Transaction ID : SB17.59260

**B. American Express**

Mailing Address P.O. Box 114

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2843.01 |
|---------|

Transaction ID : SB17.58581

**C. Max Fish**

Mailing Address 140 Glastonbury Blvd.

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 18  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 65.46 |
|-------|

Transaction ID : SB17.58581.0

[MEMO ITEM]

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

2850.96

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 20  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 5.00 |
|------|

Transaction ID : SB17.58581.1

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 21  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 16.00 |
|-------|

Transaction ID : SB17.58581.3

**[MEMO ITEM]****C. Verizon Wireless**

Mailing Address 20 Alexander Drive

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Wallingford | CT    | 06492    |

Purpose of Disbursement  
Cell phone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 22  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 666.16 |
|--------|

Transaction ID : SB17.58581.6

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 22  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 196.25 |
|--------|

Transaction ID : SB17.58581.7

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 24  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 15.00 |
|-------|

Transaction ID : SB17.58581.9

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**c. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 24  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 26.00 |
|-------|

Transaction ID : SB17.58581.10

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 24  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 23.00 |
|-------|

Transaction ID : SB17.58581.11

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 25  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 27.00 |
|-------|

Transaction ID : SB17.58581.12

**[MEMO ITEM]****c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 116.25 |
|--------|

Transaction ID : SB17.58581.14

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 78.13 |
|-------|

Transaction ID : SB17.58581.15

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 02  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 10.10 |
|-------|

Transaction ID : SB17.58581.16

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**c. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 02  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 10.15 |
|-------|

Transaction ID : SB17.58581.17

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Montemartre Restaurant**

Mailing Address 327 7th Street SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 32.30 |
|-------|

Transaction ID : SB17.58581.18

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 8.93 |
|------|

Transaction ID : SB17.58581.19

**[MEMO ITEM]****c. Sonoma**

Mailing Address 223 Pennsylvania Avenue, S.E.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 64.80 |
|-------|

Transaction ID : SB17.58581.21

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 05 / 2014      |

Amount of Each Disbursement this Period

|      |
|------|
| 7.86 |
|------|

Transaction ID : SB17.58581.23

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| San Francisco | CA    | 94105    |

Purpose of Disbursement  
Travel

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 06 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 10.17 |
|-------|

Transaction ID : SB17.58581.24

**[MEMO ITEM]****c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 07 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB17.58581.25

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 08  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 94.38 |
|-------|

Transaction ID : SB17.58581.27

**[MEMO ITEM]****B. Capitol Hills Suites**

Mailing Address 200 C Street SE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 769.44 |
|--------|

Transaction ID : SB17.58581.28

**[MEMO ITEM]****c. Peppercorn's Grill**

Mailing Address P.O. Box 776

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Plainville | CT    | 06062    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 36.78 |
|-------|

Transaction ID : SB17.58581.29

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 19.40 |
|-------|

Transaction ID : SB17.58581.30

**[MEMO ITEM]****B. Peppercorn's Grill**

Mailing Address P.O. Box 776

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Plainville | CT    | 06062    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 68.31 |
|-------|

Transaction ID : SB17.58581.32

**[MEMO ITEM]****C. American Express**

Mailing Address P.O. Box 114

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Service fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 27  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 7.95 |
|------|

Transaction ID : SB17.59261

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

|      |
|------|
| 7.95 |
|------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Apollo Political, LLC**

Mailing Address 1914 Windham Lance

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 26  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Silver Spring | MD    | 20902    |

Purpose of Disbursement  
Videography

Amount of Each Disbursement this Period

|         |
|---------|
| 6060.08 |
|---------|

**Transaction ID : SB17.59282**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Berkshire Bank CBT**

Mailing Address 7 Sycamore Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 02  |   | 2014    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Service fee

Amount of Each Disbursement this Period

|       |
|-------|
| 10.00 |
|-------|

**Transaction ID : SB17.59262**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Berkshire Bank CBT**

Mailing Address 7 Sycamore Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 03  |   | 2014    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Service fee

Amount of Each Disbursement this Period

|       |
|-------|
| 10.00 |
|-------|

**Transaction ID : SB17.59267**

Candidate Name

Category/  
Type

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).....

6080.08

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Capital Bankcard**

Mailing Address P. O. Box 6600

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Hagerstown | MD    | 21740    |

Purpose of Disbursement  
Service fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 47.20 |
|-------|

Transaction ID : SB17.59264

**B. Capital Grille**

Mailing Address 601 Pennsylvania Avenue NW

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 253.12 |
|--------|

Transaction ID : SB17.58568

**c. Capital Grille**

Mailing Address 601 Pennsylvania Avenue NW

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 151.29 |
|--------|

Transaction ID : SB17.59199

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

451.61

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Casa Mia Restaurant**

Mailing Address 381 Franklin Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06114    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3539.00 |
|---------|

Purpose of Disbursement  
CateringCategory/  
Type

Transaction ID : SB17.59281

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Cavey's**

Mailing Address 43 E. Center Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 06  |   | 2014    |

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1010.80 |
|---------|

Purpose of Disbursement  
CateringCategory/  
Type

Transaction ID : SB17.58528

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Charter Oak Square, LP**

Mailing Address Charter Oak Place

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 27  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06108    |

Amount of Each Disbursement this Period

|       |
|-------|
| 75.00 |
|-------|

Purpose of Disbursement  
ParkingCategory/  
Type

Transaction ID : SB17.58526

Candidate Name

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).....

4624.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Charter Oak Square, LP**

Mailing Address Charter Oak Place

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06108    |

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 75.00 |
|-------|

Transaction ID : SB17.59157

**B. Chatterleys**

Mailing Address 2 Bridge Street

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| New Hartford | CT    | 06057    |

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 19  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1542.07 |
|---------|

Transaction ID : SB17.59171

**c. Chatterleys**

Mailing Address 2 Bridge Street

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| New Hartford | CT    | 06057    |

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 19  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 859.30 |
|--------|

Transaction ID : SB17.59173

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

2476.37

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Linda Christiana**

Mailing Address 96 Oak Forest Drive

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 01  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 612.71 |
|--------|

Transaction ID : SB17.59270

**B. Linda Christiana**

Mailing Address 96 Oak Forest Drive

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 589.38 |
|--------|

Transaction ID : SB17.58634

**c. Collector of Revenue**

Mailing Address 150424

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06115    |

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 24  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 297.82 |
|--------|

Transaction ID : SB17.59156

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

1499.91

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Comcast Corporation**

Mailing Address PO Box 1577

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07101    |

Purpose of Disbursement  
Phone service

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 30 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 504.02 |
|--------|

Transaction ID : SB17.59220

**B. Commissioner of Revenue Services**

Mailing Address P.O. Box 5055

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06102    |

Purpose of Disbursement  
Taxes

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 04 / 29 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 85.00 |
|-------|

Transaction ID : SB17.58644

**C. Commissioner of Revenue Services**

Mailing Address P.O. Box 5055

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06102    |

Purpose of Disbursement  
Taxes

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 12 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 338.68 |
|--------|

Transaction ID : SB17.58556

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

927.70



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Commissioner of Revenue Services**

Mailing Address P.O. Box 5055

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06102    |

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 11  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 592.61 |
|--------|

Transaction ID : SB17.59194

**B. Core Documents**

Mailing Address 501 Village Green Parkway

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Bradenton | FL    | 34209    |

Purpose of Disbursement  
Payroll service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 27.00 |
|-------|

Transaction ID : SB17.58552

**C. Core Documents**

Mailing Address 501 Village Green Parkway

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Bradenton | FL    | 34209    |

Purpose of Disbursement  
Payroll service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 03  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 27.00 |
|-------|

Transaction ID : SB17.59179

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

646.61

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Costa Del Sol Ltd**

Mailing Address 901 Wethersfield Avenue

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1817.97 |
|---------|

Transaction ID : SB17.59168

**B. Crystal Sherrison, LLC**

Mailing Address 330 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 99.00 |
|-------|

Transaction ID : SB17.58535

**c. Crystal Sherrison, LLC**

Mailing Address 330 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 99.00 |
|-------|

Transaction ID : SB17.59158

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

2015.97

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Crystal Sherrison, LLC**

Mailing Address 330 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 16  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Transaction ID : SB17.59161

**B. Democratic State Central Comm.**

Mailing Address 330 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Transaction ID : SB17.58527

**C. Democratic State Central Comm.**

Mailing Address 330 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Transaction ID : SB17.59165

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

1000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EarthLink, Inc.**

Mailing Address P.O. Box 7645

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Atlanta | GA    | 30357    |

Purpose of Disbursement  
Web service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 19.95 |
|-------|

Transaction ID : SB17.58561

**B. EarthLink, Inc.**

Mailing Address P.O. Box 7645

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Atlanta | GA    | 30357    |

Purpose of Disbursement  
Web service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 16  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 19.95 |
|-------|

Transaction ID : SB17.59203

**C. Exxon/Mobil**

Mailing Address P. O. Box 688940

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Des Moines | IA    | 50368    |

Purpose of Disbursement  
Gasoline

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 153.00 |
|--------|

Transaction ID : SB17.58567

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

192.90

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Exxon/Mobil**

Mailing Address P. O. Box 688940

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Des Moines | IA    | 50368    |

Purpose of Disbursement  
Gasoline

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)                          |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 20 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 272.00 |
|--------|

Transaction ID : SB17.59208

**B. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

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)                          |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 05 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.51 |
|-------|

Transaction ID : SB17.58551

**c. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

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)                          |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 07 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.51 |
|-------|

Transaction ID : SB17.58553

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

323.02

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.58555

**B. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.58560

**C. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 16  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.58573

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

76.17

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.50 |
|-------|

Transaction ID : SB17.58578

**B. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.58579

**C. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.58632

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

76.28

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 02  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 26.12 |
|-------|

Transaction ID : SB17.59178

**B. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 04  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.59182

**C. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 11  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.39 |
|-------|

Transaction ID : SB17.59190

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

76.90



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 31.36 |
|-------|

Transaction ID : SB17.59218

**B. Barry Feldman**

Mailing Address 28 Uncas Road

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Clinton | CT    | 06413-2315 |

Purpose of Disbursement  
Reimbursement - food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 25  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 80.00 |
|-------|

Transaction ID : SB17.58639

**c. Ashley's**

Mailing Address 221 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 21  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB17.58639.0

[MEMO ITEM]

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

|        |
|--------|
| 111.36 |
|--------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 138 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ashley's**

Mailing Address 221 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 23  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3108.98 |
|---------|

Transaction ID : SB17.58639.1

**[MEMO ITEM]****B. Barry Feldman**

Mailing Address 28 Uncas Road

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Clinton | CT    | 06413-2315 |

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 01  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3048.98 |
|---------|

Transaction ID : SB17.59269

**c. Barry Feldman**

Mailing Address 28 Uncas Road

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Clinton | CT    | 06413-2315 |

Purpose of Disbursement  
Reimbursement - Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 60.00 |
|-------|

Transaction ID : SB17.58562

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

3108.98

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 139 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ashley's**

Mailing Address 221 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2834.01 |
|---------|

Transaction ID : SB17.58562.0

**[MEMO ITEM]****B. Ashley's**

Mailing Address 221 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 30.00 |
|-------|

Transaction ID : SB17.58562.1

**[MEMO ITEM]****c. Barry Feldman**

Mailing Address 28 Uncas Road

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Clinton | CT    | 06413-2315 |

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2834.01 |
|---------|

Transaction ID : SB17.58635

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

2834.01

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Barry Feldman**

Mailing Address 28 Uncas Road

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Clinton | CT    | 06413-2315 |

Purpose of Disbursement  
Reimbursement - Food and beverage

Candidate Name

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
|----------------|---|

|                   |   |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
|-------------------|---|

State: District:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 11 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 80.00 |
|-------|

Transaction ID : SB17.59191

**B. Ashley's**

Mailing Address 221 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
|----------------|---|

|                   |   |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
|-------------------|---|

State: District:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 11 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB17.59191.0

[MEMO ITEM]

**c. Ashley's**

Mailing Address 221 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Food and beverage

Candidate Name

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
|----------------|---|

|                   |   |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
|-------------------|---|

State: District:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 09 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB17.59191.1

[MEMO ITEM]

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

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

|       |
|-------|
| 80.00 |
|-------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Goodwin College, LLC**

Mailing Address One Riverside Drive

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06118    |

Purpose of Disbursement  
Facility fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 27  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 625.00 |
|--------|

Transaction ID : SB17.58525

**B. Goodwin College, LLC**

Mailing Address One Riverside Drive

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06118    |

Purpose of Disbursement  
Facility fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 125.00 |
|--------|

Transaction ID : SB17.59230

**c. Ellen Hart**

Mailing Address 31 Woodland Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 01  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1574.42 |
|---------|

Transaction ID : SB17.59271

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

2324.42

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ellen Hart**

Mailing Address 31 Woodland Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Salary

Amount of Each Disbursement this Period

|         |
|---------|
| 1704.00 |
|---------|

Transaction ID : SB17.58570

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. Ellen Hart**

Mailing Address 31 Woodland Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 30  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Salary

Amount of Each Disbursement this Period

|         |
|---------|
| 1574.42 |
|---------|

Transaction ID : SB17.58636

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. Ellen Hart**

Mailing Address 31 Woodland Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Salary

Amount of Each Disbursement this Period

|         |
|---------|
| 2039.34 |
|---------|

Transaction ID : SB17.59201

Candidate Name

Category/  
Type

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:

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

5317.76

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Hoffman Auto**

Mailing Address Connecticut Blvd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Eadt Hartford | CT    | 06108    |

Amount of Each Disbursement this Period

|       |
|-------|
| 44.08 |
|-------|

Purpose of Disbursement  
Auto RepairsCategory/  
Type**Transaction ID : SB17.59167**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Hoffman Auto**

Mailing Address Connecticut Blvd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Eadt Hartford | CT    | 06108    |

Amount of Each Disbursement this Period

|        |
|--------|
| 175.62 |
|--------|

Purpose of Disbursement  
Auto RepairsCategory/  
Type**Transaction ID : SB17.59174**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. Hospital for Special Care**

Mailing Address 2150 Corbin Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 19  |   | 2014    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| New Britain | CT    | 06053    |

Amount of Each Disbursement this Period

|        |
|--------|
| 250.00 |
|--------|

Purpose of Disbursement  
AdvertisementCategory/  
Type**Transaction ID : SB17.59284**

Candidate Name

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).....

469.70

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. House of Flora Flower Market**

Mailing Address PO box 330231

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06113    |

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 07  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 454.68 |
|--------|

Transaction ID : SB17.58539

**B. House of Flora Flower Market**

Mailing Address PO box 330231

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06113    |

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 11  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 74.45 |
|-------|

Transaction ID : SB17.59175

**C. Junior Achievement of Southeast NE**

Mailing Address 70 Farmington Avenue

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Event tickets

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 07  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 8000.00 |
|---------|

Transaction ID : SB17.58531

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

8529.13



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Junior Achievement of Southeast NE**

Mailing Address 70 Farmington Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 07  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Purpose of Disbursement  
Advertisement

Candidate Name

Category/  
Type**Transaction ID : SB17.58533**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Ledger Publications**

Mailing Address 740 North Main Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06117    |

Amount of Each Disbursement this Period

|        |
|--------|
| 185.00 |
|--------|

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type**Transaction ID : SB17.59231**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Geoffrey R. Luxenberg**

Mailing Address 45 Chatham Road

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06042    |

Amount of Each Disbursement this Period

|        |
|--------|
| 286.83 |
|--------|

Purpose of Disbursement  
Reimbursement - Catering

Candidate Name

Category/  
Type**Transaction ID : SB17.59166**

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).....

2471.83

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Maneeley's Banquet Facility, LLC**

Mailing Address 65 Rye Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| South Windsor | CT    | 06074    |

Amount of Each Disbursement this Period

|         |
|---------|
| 9778.41 |
|---------|

Purpose of Disbursement  
CateringCategory/  
Type**Transaction ID : SB17.58545**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06110    |

Amount of Each Disbursement this Period

|        |
|--------|
| 121.17 |
|--------|

Purpose of Disbursement  
PrintingCategory/  
Type**Transaction ID : SB17.58546**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 23  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06110    |

Amount of Each Disbursement this Period

|        |
|--------|
| 786.72 |
|--------|

Purpose of Disbursement  
PrintingCategory/  
Type**Transaction ID : SB17.58544**

Candidate Name

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).....

10686.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Mark Twain House**

Mailing Address 351 Farmington Avenue

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 13  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 250.00 |
|--------|

Transaction ID : SB17.59232

**B. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06106    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 09  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 48.41 |
|-------|

Transaction ID : SB17.59188

**c. Max Bibo's**

Mailing Address 250 Main Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 06  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 23.34 |
|-------|

Transaction ID : SB17.59183

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

321.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Max Fish**

Mailing Address 140 Glastonbury Blvd.

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Political meals

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) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 16 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 341.30 |
|--------|

Transaction ID : SB17.58572

**B. Mayor's Charity Ball**

Mailing Address 33 Gorman Place

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06108    |

Purpose of Disbursement  
Event Tickets

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) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 04 / 27 / 2014      |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB17.58547

**C. Merchant Services**

Mailing Address P. O. Box 6600

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Hagerstown | MD    | 21740    |

Purpose of Disbursement  
Service fee

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) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 05 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 32.89 |
|-------|

Transaction ID : SB17.59263

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

1374.19

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address P. O. Box 6600

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Hagerstown | MD    | 21740    |

Purpose of Disbursement  
Service fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 05  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 52.45 |
|-------|

Transaction ID : SB17.59268

**B. Mitchell Development, LLC**

Mailing Address P.O. Box 1235

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| South Windsor | CT    | 06074    |

Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Transaction ID : SB17.58542

**c. Christopher Moquin**

Mailing Address 7 Laurwood Drive

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Bolton | CT    | 06043    |

Purpose of Disbursement  
Cleaning

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 27  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Transaction ID : SB17.59162

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

652.45

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20005    |

Purpose of Disbursement  
Web service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 02  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.58549

**B. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20005    |

Purpose of Disbursement  
Web service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 03  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.59180

**C. Andrew J. Packer**

Mailing Address 42 Goodwin Circle

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06105    |

Purpose of Disbursement  
Reimbursement - food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 249.64 |
|--------|

Transaction ID : SB17.58543

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

1549.64

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 1201 Third Avenue

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Seattle | WA    | 98101    |

Purpose of Disbursement  
Compliance advice

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 4665.74 |
|---------|

Transaction ID : SB17.59280

**B. Alan Piacenta**

Mailing Address 2594 Main Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Rocky Hill | CT    | 06067    |

Purpose of Disbursement  
Entertainment

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 600.00 |
|--------|

Transaction ID : SB17.59154

**C. Piatti Ristorante**

Mailing Address 1001 Hebron Avenue

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 26  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 564.00 |
|--------|

Transaction ID : SB17.59214

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

5829.74

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. School Street Plaza, LLC**

Mailing Address 360 Bloomfield Avenue

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Windsor | CT    | 06095    |

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 26  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3712.50 |
|---------|

Transaction ID : SB17.59278

**B. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 521 Connecticut Boulevard

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06108    |

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 136.02 |
|--------|

Transaction ID : SB17.58550

**c. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 521 Connecticut Boulevard

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06108    |

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 13  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 31.13 |
|-------|

Transaction ID : SB17.58558

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

3879.65



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06108    |

Amount of Each Disbursement this Period

|      |
|------|
| 7.43 |
|------|

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.58577

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 25  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| East Hartford | CT    | 06108    |

Amount of Each Disbursement this Period

|       |
|-------|
| 73.53 |
|-------|

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.59209

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. The Hartford**

Mailing Address Hartford Plaza

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 13  |   | 2014    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Amount of Each Disbursement this Period

|        |
|--------|
| 129.80 |
|--------|

Purpose of Disbursement  
InsuranceCategory/  
Type

Transaction ID : SB17.58559

Candidate Name

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).....

210.76

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Hartford**

Mailing Address Hartford Plaza

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 46.72 |
|-------|

Transaction ID : SB17.59200

**B. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 25  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 210.44 |
|--------|

Transaction ID : SB17.58081

**c. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 116.27 |
|--------|

Transaction ID : SB17.58563

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

373.43

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 213.36 |
|--------|

Transaction ID : SB17.58564

**B. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 430.41 |
|--------|

Transaction ID : SB17.58565

**c. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 818.89 |
|--------|

Transaction ID : SB17.58569

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

1462.66

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Fundraising fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 4679.40 |
|---------|

Transaction ID : SB17.58571

**B. The Vinci Group**

Mailing Address 24 Huntington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Manchester | CT    | 06040    |

Purpose of Disbursement  
Fundraising fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 20  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 9613.13 |
|---------|

Transaction ID : SB17.59207

**c. The Whisk**

Mailing Address 510 New Park Avenue

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06110    |

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2309.12 |
|---------|

Transaction ID : SB17.58540

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

16601.65

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Whisk**

Mailing Address 510 New Park Avenue

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| West Hartford | CT    | 06110    |

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 53.18 |
|-------|

Transaction ID : SB17.59159

**B. Top Shelf Liquors**

Mailing Address 300 New Britain Road

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Kensington | CT    | 06000    |

Purpose of Disbursement  
Beverages

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 19  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 263.14 |
|--------|

Transaction ID : SB17.59176

**c. Tops Supermarket**

Mailing Address RT 322 South End Road

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Plantsville | CT    | 06479    |

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 360.00 |
|--------|

Transaction ID : SB17.59228

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

676.32

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Union Street Tavern**

Mailing Address 20 Union Street

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Windsor | CT    | 06095    |

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 19  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 37.21 |
|-------|

Transaction ID : SB17.58575

**B. United States Postal Service**

Mailing Address Ann Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 5.80 |
|------|

Transaction ID : SB17.58576

**c. United States Postal Service**

Mailing Address Ann Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 23  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 245.00 |
|--------|

Transaction ID : SB17.58580

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

288.01

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address Ann Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 490.00 |
|--------|

Transaction ID : SB17.58628

**B. United States Postal Service**

Mailing Address Ann Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Hartford | CT    | 06103    |

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 26  |   | 2014    |

Amount of Each Disbursement this Period

|      |
|------|
| 5.60 |
|------|

Transaction ID : SB17.59211

**c. United States Treasury**

Mailing Address P.O. Box 371493

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Pittsburgh | PA    | 15250    |

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2062.28 |
|---------|

Transaction ID : SB17.58557

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

2557.88

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 160 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address P.O. Box 371493

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Pittsburgh | PA    | 15250    |

Purpose of Disbursement  
Taxes

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) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 11 / 2014      |

Amount of Each Disbursement this Period

|         |
|---------|
| 3576.90 |
|---------|

Transaction ID : SB17.59195

**B. Verizon Wireless**

Mailing Address 20 Alexander Drive

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Wallingford | CT    | 06492    |

Purpose of Disbursement  
Cell phone service

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) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 04 / 29 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 457.89 |
|--------|

Transaction ID : SB17.58643

**c. Verizon Wireless**

Mailing Address 20 Alexander Drive

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Wallingford | CT    | 06492    |

Purpose of Disbursement  
Cell phone service

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) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 02 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 35.00 |
|-------|

Transaction ID : SB17.58548

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

4069.79





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 162 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 20 Alexander Drive

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Wallingford | CT    | 06492    |

Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 770.06 |
|--------|

Transaction ID : SB17.59219

**B.**

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

**C.**

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

|        |
|--------|
| 770.06 |
|--------|

|           |
|-----------|
| 115081.62 |
|-----------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 163 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Abercrombie for Governor**

Mailing Address 1050 Ala Moana Blvd.

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Honolulu | HI    | 96814    |

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 28  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB21.59164

**B. B.E.S.T. Robotics Team**

Mailing Address 330 Hubbard Street

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Glastonbury | CT    | 06033    |

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 06  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB21.58529

**c. Card Services**

Mailing Address PO Box 13337

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Philadelphia | PA    | 19101    |

Purpose of Disbursement  
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 06  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 620.00 |
|--------|

Transaction ID : SB21.58124

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

2620.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Purpose of Disbursement  
Travel - officially connected

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 04 / 09 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 279.00 |
|--------|

Transaction ID : SB21.58124.0

**[MEMO ITEM]****B. Sanditz Travel**

Mailing Address 98 Washington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Middletown | CT    | 06457    |

Purpose of Disbursement  
Travel - officially connected

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 04 / 16 / 2014      |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB21.58124.1

**[MEMO ITEM]****c. U. S. Airways**

Mailing Address Bradley International Airport

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Purpose of Disbursement  
Travel - officially connected

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 04 / 15 / 2014      |

Amount of Each Disbursement this Period

|        |
|--------|
| 301.00 |
|--------|

Transaction ID : SB21.58124.2

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 165 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Card Services**

Mailing Address PO Box 13337

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Philadelphia | PA    | 19101    |

Purpose of Disbursement  
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2411.00 |
|---------|

Transaction ID : SB21.58617

**B. U. S. Airways**

Mailing Address Bradley International Airport

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 25  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 334.00 |
|--------|

Transaction ID : SB21.58617.0

[MEMO ITEM]

**c. Sanditz Travel**

Mailing Address 98 Washington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Middletown | CT    | 06457    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 28  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB21.58617.1

[MEMO ITEM]

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

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

2411.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 28  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 420.00 |
|--------|

Transaction ID : SB21.58617.2

**[MEMO ITEM]****B. Sanditz Travel**

Mailing Address 98 Washington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Middletown | CT    | 06457    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 40.00 |
|-------|

Transaction ID : SB21.58617.3

**[MEMO ITEM]****c. U. S. Airways**

Mailing Address Bradley International Airport

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 29  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 281.00 |
|--------|

Transaction ID : SB21.58617.4

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

|      |
|------|
| 0.00 |
|------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 06  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Amount of Each Disbursement this Period

|        |
|--------|
| 490.00 |
|--------|

Purpose of Disbursement  
Travel - officially connected

Transaction ID : SB21.58617.5

Candidate Name

Category/  
Type**[MEMO ITEM]**

|                |           |   |
|----------------|-----------|---|
| Office Sought: | House     | Disbursement For:   |
|                | Senate    |   |
|                | President |   |
| State:         | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |

Full Name (Last, First, Middle Initial)

**B. U. S. Airways**

Mailing Address Bradley International Airport

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 30  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Purpose of Disbursement  
Travel - officially connected

Transaction ID : SB21.58617.6

Candidate Name

Category/  
Type**[MEMO ITEM]**

|                |           |   |
|----------------|-----------|---|
| Office Sought: | House     | Disbursement For:   |
|                | Senate    |   |
|                | President |   |
| State:         | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |

Full Name (Last, First, Middle Initial)

**c. U. S. Airways**

Mailing Address Bradley International Airport

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 30  |   | 2014    |

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Amount of Each Disbursement this Period

|        |
|--------|
| 356.00 |
|--------|

Purpose of Disbursement  
Travel - officially connected

Transaction ID : SB21.58617.7

Candidate Name

Category/  
Type**[MEMO ITEM]**

|                |           |   |
|----------------|-----------|---|
| Office Sought: | House     | Disbursement For:   |
|                | Senate    |   |
|                | President |   |
| State:         | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |

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

|      |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 173

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sanditz Travel**

Mailing Address 98 Washington Street

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Middletown | CT    | 06457    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

Amount of Each Disbursement this Period

|          |
|----------|
| 25000.00 |
|----------|

Transaction ID : SB21.58617.8

**[MEMO ITEM]****B. U. S. Airways**

Mailing Address Bradley International Airport

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Windsor Locks | CT    | 06196    |

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 210.00 |
|--------|

Transaction ID : SB21.58617.9

**[MEMO ITEM]****C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-CONTRIBUTIONS**

Mailing Address 430 S CAPITOL ST SE 2ND FLOOR

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| WASHINGTON | DC    | 20003    |

Purpose of Disbursement  
Transfer of Funds

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 23  |   | 2014    |

Amount of Each Disbursement this Period

|          |
|----------|
| 25000.00 |
|----------|

Transaction ID : SB21.59283

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

25000.00





**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 170 OF 173

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Dan Malloy for Governor**

Nature of Debt (Purpose):

E-maill list rental

Mailing Address PO Box 4038

City State

Zip Code

Stamford

CT

06907

Outstanding Balance Beginning This Period

158.70

Transaction ID : SD9.58106

Amount Incurred This Period

0.00

Payment This Period

158.70

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Charles R. Epstein**

Nature of Debt (Purpose):

Reimbursement - Food and Beverage

Mailing Address 19 Crest Drive

City State

Zip Code

Cromwell

CT

06416

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD9.48266

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Geoffrey R. Luxenberg**

Nature of Debt (Purpose):

Supplies

Mailing Address 45 Chatham Road

City

State

Zip Code

Manchester

CT

06042

Outstanding Balance Beginning This Period

156.32

Transaction ID : SD9.48276

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

156.32

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

256.32

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 171 OF 173

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Robert E. Patricelli**

Nature of Debt (Purpose):

Reimbursement - Food

Mailing Address 77 Hartford Road

City State

Zip Code

Simsbury

CT

06070

Outstanding Balance Beginning This Period

524.48

Transaction ID : SD9.56160

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

524.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Suburban Liquor Shop**

Nature of Debt (Purpose):

Beverages

Mailing Address 26 New Britain Avenue

City State

Zip Code

Rocky Hill

CT

06067

Outstanding Balance Beginning This Period

208.83

Transaction ID : SD9.48270

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

208.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ►

733.31

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

989.63

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

989.63

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 172 OF 173

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL  
EDUCATION**

Nature of Debt (Purpose):

Contribution returned 7/14/2012

Mailing Address 555 NEW JERSEY AVENUE N W

City State

Zip Code

WASHINGTON

DC

20001

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.49876

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Perkins Coie**

Nature of Debt (Purpose):

Compliance advice

Mailing Address 1201 Third Avenue

City State

Zip Code

Seattle

WA

98101

Outstanding Balance Beginning This Period

630.00

Transaction ID : SD10.43734

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Steptoe & Johnson, LLP**

Nature of Debt (Purpose):

Facility Fee

Mailing Address 1330 Connecticut Avenue, NW

City

State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

50.00

Transaction ID : SD10.37308

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

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

3180.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 173 OF 173

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Verizon Wireless**

Nature of Debt (Purpose):

Cell phone service

Mailing Address 20 Alexander Drive

City State

Zip Code

Wallingford

CT

06492

Outstanding Balance Beginning This Period

482.92

**Transaction ID : SD10.42519**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

482.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

482.92

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

3662.92

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

3662.92