

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 2 1/2 Beacon St Concord Concord NH 03301 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00178038 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 07 01 2005 through 12 31 2005

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 Martha Fuller Clark

Signature of Treasurer Electronically Filed by Martha Fuller Clark Date 04 19 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		123783.36
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	54206.22									
(c) Total Receipts (from Line 19)	187676.48	339687.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	241882.70	463471.00								
7. Total Disbursements (from Line 31)	232482.30	454070.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9400.40	9400.40								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	30457.85									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	54103.76	111184.56
(i) Itemized (use Schedule A)	51444.27	99223.04
(ii) Unitemized	105548.03	210407.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	1000.00
(b) Political Party Committees	39800.00	43400.00
(c) Other Political Committees (such as PACs)	145348.03	254807.60
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	7711.54	14075.01
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	10041.94	46019.57
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2570.77	2781.26
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	22004.20	22004.20
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	22004.20	22004.20
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	187676.48	339687.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	165672.28	317683.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3856.43	3856.43
(ii) Non-Federal Share.....	21854.20	21854.20
(b) Other Federal Operating Expenditures.....	195940.20	402528.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	221650.83	428239.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	10831.47	25831.47
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	232482.30	454070.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	210628.10	432216.40

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	145348.03	254807.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	145348.03	254807.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	199796.63	406384.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	10041.94	46019.57
38. Net Operating Expenditures (subtract Line 37 from Line 36)	189754.69	360365.36

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Hon. Susan W. Almy		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2005	
Mailing Address 266 Poverty Ln		Transaction ID: C71241	
City State Zip Code Lebanon NH 03766-2730		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2545.00	

Full Name (Last, First, Middle Initial) B. Mr. Michael J. Atkins		Date of Receipt M M / D D / Y Y Y Y 10 / 07 / 2005	
Mailing Address 484 Locust Ln		Transaction ID: C71391	
City State Zip Code Lyndeborough NH 03802		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Atkins Law Offices Occupation Attorney			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Mrs. Christine A. Avallone		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005	
Mailing Address 18 Pine St		Transaction ID: C71340	
City State Zip Code Concord NH 03301-3830		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	1600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Phillip E Bainbridge		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2005	
Mailing Address 920 South 900 East		Transaction ID: C71302	
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Baker & Daniels	Occupation Attorney		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. William H. Barry, III		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2005	
Mailing Address 46 Raymond St		Transaction ID: C71522	
City State Zip Code Nashua NH 03064-1953	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation lawyer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00		

Full Name (Last, First, Middle Initial) C. Ms. Ann L Bawa		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2005	
Mailing Address 6 Preserve Dr		Transaction ID: C71362	
City State Zip Code Nashua NH 03064-8107	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired Computer Programmer		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Ann L Bawa		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 5	
Mailing Address 6 Preserve Dr		Transaction ID: C73455	
City State Zip Code Nashua NH 03064-8107	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired Computer Programmer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. Barbara N Beeson		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 3 / 2 0 0 5	
Mailing Address 7 Riverwoods Dr F125		Transaction ID: C71326	
City State Zip Code Exeter NH 03833	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mr. John M. Blackford		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 2157		Transaction ID: C71389	
City State Zip Code Concord NH 03302-2157	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Management Consultant		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Pamela Blackford

Mailing Address 30 George Rd

City State Zip Code
Hopkinton NH 03229-2622

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

Name of Employer NA Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2005

Transaction ID: C71523

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Cathal A Blake

Mailing Address 42 Blackman Road

City State Zip Code
Chichester NH 03258-6101

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2005

Transaction ID: C71251

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 167

City State Zip Code
New Castle NH 03854

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

Name of Employer RavenHouse International Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2005

Transaction ID: C71813

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. David A Borden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address PO Box 167		Transaction ID: C71540	
City State Zip Code New Castle NH 03854		Amount of Each Receipt this Period 265.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RavenHouse International Consultant			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 665.00	

Full Name (Last, First, Middle Initial) B. Mr. Anthony P. Botticello		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 709 Hall St		Transaction ID: C71539	
City State Zip Code Manchester NH 03104		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation United States Postal Service Sales & Service Associate			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Hon. Paula E. Bradley		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 5	
Mailing Address 194 Randolph Hill Rd		Transaction ID: C71332	
City State Zip Code Randolph NH 03593		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired Legislator			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	615.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Callaghan

Mailing Address 505 River Rd

City State Zip Code
Manchester NH 03104-1980

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

Name of Employer Occupation
Devine, Millimet, and Branch Attorney/Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2005

Transaction ID: C71454

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Linda Cates

Mailing Address 120 Cabot Road

City State Zip Code
Nelson NH 03457

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2005

Transaction ID: C71351

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Jean M. Cluett

Mailing Address 80 Lyme Rd
Kendal at hanover 340

City State Zip Code
Hanover NH 03755-1225

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

Name of Employer Occupation
N/A Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
812.50

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2005

Transaction ID: C71155

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	2700.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jean M. Cluett		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2005	
Mailing Address 80 Lyme Rd Kendal at hanover 340		Transaction ID: C73605	
City Hanover State NH Zip Code 03755-1225		Amount of Each Receipt this Period 712.50	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 812.50	
		[MEMO ITEM] * State Party Victory Fund Memo	

Full Name (Last, First, Middle Initial) B. Annabelle Cone		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2005	
Mailing Address 330 Parsonage Rd		Transaction ID: C71154	
City Cornish State NH Zip Code 03745		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Annabelle Cone		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2005	
Mailing Address 330 Parsonage Rd		Transaction ID: C73438	
City Cornish State NH Zip Code 03745		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Helen A Connell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 5	
Mailing Address 11 Garden St		Transaction ID: C72186	
City Somersworth	State NH	Amount of Each Receipt this Period 150.00	
Zip Code 03878-2516		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Helen A Connell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 5	
Mailing Address 11 Garden St		Transaction ID: C72225	
City Somersworth	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03878-2516		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. Hiram E Connell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 11 Garden St		Transaction ID: C71533	
City Somersworth	State NH	Amount of Each Receipt this Period 130.00	
Zip Code 03878-2516		Amount of Each Receipt this Period 130.00	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00		

SUBTOTAL of Receipts This Page (optional) ▶	380.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 194		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mrs. Patricia Cornell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 787 Montgomery St		Transaction ID: C71418	
City State Zip Code Manchester NH 03102-3027	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Manchester School District	Occupation Guidance Counselor		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. Mrs. Patricia Cornell		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 787 Montgomery St		Transaction ID: C73467	
City State Zip Code Manchester NH 03102-3027	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Manchester School District	Occupation Guidance Counselor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Ms. Ann-Marie Cote		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 5	
Mailing Address 11 Pine Cove Rd.		Transaction ID: C71273	
City State Zip Code Campton NH 03223	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer New England Life Care	Occupation Registered Nurse		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Steve Crane		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5
Mailing Address 1585 North US Highway 421		Transaction ID: C71547
City State Zip Code Whitestown IN 46075	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Hanover Communications	Occupation CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. Stephen T. Crary		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 5
Mailing Address 80 Lyme Road		Transaction ID: C73604
City State Zip Code Hanover NH 03755	Amount of Each Receipt this Period 289.75	
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 822.25	
[MEMO ITEM] * State Party Victory Fund Memo		

Full Name (Last, First, Middle Initial) C. Mr. Stephen T. Crary		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5
Mailing Address 80 Lyme Road		Transaction ID: C73620
City State Zip Code Hanover NH 03755	Amount of Each Receipt this Period 332.50	
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 822.25	
[MEMO ITEM] * State Party Victory Fund Memo		

SUBTOTAL of Receipts This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Harlan Cutshall		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2005	
Mailing Address PO Box 1558		Transaction ID: C71375	
City State Zip Code North Hampton NH 03862-1558		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Retired			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. James M. Demers		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2005	
Mailing Address 951 Ocean Blvd		Transaction ID: C71374	
City State Zip Code Hampton NH 03842-1449		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Demers Group Occupation Lobbyist			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mr. Gary Bruce Dodds		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005	
Mailing Address 300 Sagamore Rd		Transaction ID: C71303	
City State Zip Code Rye NH 03870-2035		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation small business owner			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Gary Bruce Dodds		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2005
Mailing Address 300 Sagamore Rd		Transaction ID: C71320
City Rye State NH Zip Code 03870-2035	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Occupation small business owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Mr. Gary Bruce Dodds		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2005
Mailing Address 300 Sagamore Rd		Transaction ID: C71480
City Rye State NH Zip Code 03870-2035	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Occupation small business owner		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert L Drysdale, III		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2005
Mailing Address 8 Mink Drive		Transaction ID: C73470
City Hanover State NH Zip Code 03755	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Dartmouth College Occupation Professor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	365.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Patrick Duffy		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2005	
Mailing Address PO Box 390		Transaction ID: C71347	
City Manchester	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03105		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed		Occupation Consultant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Miriam D Dunn		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2005	
Mailing Address 21 Pinewood Trail		Transaction ID: C71158	
City Concord	State NH	Amount of Each Receipt this Period 50.00	
Zip Code 03301-3947		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Miriam D Dunn		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2005	
Mailing Address 21 Pinewood Trail		Transaction ID: C71220	
City Concord	State NH	Amount of Each Receipt this Period 150.00	
Zip Code 03301-3947		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 194						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Miriam D Dunn		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005	
Mailing Address 21 Pinewood Trail		Transaction ID: C71341	
City State Zip Code Concord NH 03301-3947		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Mostafa El-sherif		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2005	
Mailing Address 11 Catesby Ln		Transaction ID: C71363	
City State Zip Code Bedford NH 03110-4513		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation Dentist			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Lucia Ewing		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2005	
Mailing Address 501 Smithfield Road		Transaction ID: C73607	
City State Zip Code Contoocook NH 03229-2024		Amount of Each Receipt this Period 475.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	

[MEMO ITEM]
* State Party Victory Fund Memo

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 194		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Harley G. Featherston		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005	
Mailing Address 16 Pleasant St		Transaction ID: C71170	
City State Zip Code Salem NH 03079-2907	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 521.76		

Full Name (Last, First, Middle Initial) B. Mr. Harley G. Featherston		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2005	
Mailing Address 16 Pleasant St		Transaction ID: C73442	
City State Zip Code Salem NH 03079-2907	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 521.76		

Full Name (Last, First, Middle Initial) C. Ms. Esther T. Fishman		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2005	
Mailing Address 141 Crestview Rd		Transaction ID: C71141	
City State Zip Code Manchester NH 03104-1804	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Esther T. Fishman		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2005	
Mailing Address 141 Crestview Rd		Transaction ID: C71249	
City Manchester	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03104-1804			
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Esther T. Fishman		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2005	
Mailing Address 141 Crestview Rd		Transaction ID: C71250	
City Manchester	State NH	Amount of Each Receipt this Period 50.00	
Zip Code 03104-1804			
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mrs. Hilda M. Fleisher		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2005	
Mailing Address 300 River Rd		Transaction ID: C71239	
City Manchester	State NH	Amount of Each Receipt this Period 500.00	
Zip Code 03104-2401			
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00		

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mrs. Hilda M. Fleisher		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 5	
Mailing Address 300 River Rd		Transaction ID: C71238	
City Manchester	State NH	Amount of Each Receipt this Period 50.00	
Zip Code 03104-2401		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer retired	Occupation retired	Amount of Each Receipt this Period 50.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00	Amount of Each Receipt this Period 50.00	

Full Name (Last, First, Middle Initial) B. Mrs. Hilda M. Fleisher		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 5	
Mailing Address 300 River Rd		Transaction ID: C71284	
City Manchester	State NH	Amount of Each Receipt this Period 25.00	
Zip Code 03104-2401		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer retired	Occupation retired	Amount of Each Receipt this Period 25.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00	Amount of Each Receipt this Period 25.00	

Full Name (Last, First, Middle Initial) C. Hon. Martha Fuller Fuller Clark		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 152 Middle St		Transaction ID: C71520	
City Portsmouth	State NH	Amount of Each Receipt this Period 4800.00	
Zip Code 03801-4306		Amount of Each Receipt this Period 4800.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4800.00	
Name of Employer State of New Hampshire	Occupation State Senator	Amount of Each Receipt this Period 4800.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9960.00	Amount of Each Receipt this Period 4800.00	

SUBTOTAL of Receipts This Page (optional) ▶	4875.00
TOTAL This Period (last page this line number only) ▶	4875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Anne Marie Galanis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 593A Ocean Blvd		Transaction ID: C71477
City Hampton	State NH	Zip Code 03842
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer Flextronics	Occupation Computer Technology	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Darcy Gibbons Burner		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 3630 W Ames Lake Drive NE		Transaction ID: C71493
City Redmond	State WA	Zip Code 98053
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer NA	Occupation Not Employed	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Greenwood		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 5
Mailing Address 486 N State St		Transaction ID: C71352
City Concord	State NH	Zip Code 03301-3245
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Nancy Greenwood Smith Ins Agency I	Occupation Insurance Sales	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	630.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Suzanne Harvey		Date of Receipt M M / D D / Y Y Y Y Y 09 / 09 / 2005
Mailing Address 8 Crawford Lane		Transaction ID: C71365
City Nashua	State NH	Zip Code 03063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer State of NH	Occupation Legislator	
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary P Heath		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2005
Mailing Address 76 Island Pond Rd		Transaction ID: C73307
City Manchester	State NH	Zip Code 03109-4806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Assistant Superintendent	Occupation SAU #19	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary P Heath		Date of Receipt M M / D D / Y Y Y Y Y 08 / 11 / 2005
Mailing Address 76 Island Pond Rd		Transaction ID: C71254
City Manchester	State NH	Zip Code 03109-4806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Assistant Superintendent	Occupation SAU #19	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Mary P Heath		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 76 Island Pond Rd		Transaction ID: C72014	
City Manchester	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03109-4806		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Assistant Superintendent		Occupation SAU #19	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Claire J Helfman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 7 Pierce Ln		Transaction ID: C71443	
City Hollis	State NH	Amount of Each Receipt this Period 50.00	
Zip Code 03049-6209		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer retired		Occupation Retired - RN	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Ms. Claire J Helfman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 7 Pierce Ln		Transaction ID: C71532	
City Hollis	State NH	Amount of Each Receipt this Period 65.00	
Zip Code 03049-6209		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00	
Name of Employer retired		Occupation Retired - RN	
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	215.00
TOTAL This Period (last page this line number only) ▶	215.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. John W. Hennessey, Jr.		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2005
Mailing Address 80 Lyme Rd Unit 1038		Transaction ID: C71225
City Hanover State NH Zip Code 03755-1225	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

B. Full Name (Last, First, Middle Initial) Dr. Lucius T Hill		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2005
Mailing Address 28 Doe Run Ln		Transaction ID: C73606
City Stratham State NH Zip Code 03885-2306	Amount of Each Receipt this Period 237.50	
FEC ID number of contributing federal political committee. C		
Name of Employer retired Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

[MEMO ITEM]
* State Party Victory Fund Memo

C. Full Name (Last, First, Middle Initial) Mr. Richard D. Jenkinson		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005
Mailing Address 76 Exeter Road		Transaction ID: C71377
City North Hampton State NH Zip Code 03862	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Fisher Scientific International Inc Occupation Vice President		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR Arthur J Jillette, Jr.

Mailing Address PO Box 1016
80 Brickyard Rd

City Goshen State NH Zip Code 03752-1016

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

Name of Employer State of NH Occupation Legislator

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2005

Transaction ID: C71607

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Hon. Jane p Kelley

Mailing Address 64 Winnacunnet Rd
Po Box 1

City Hampton State NH Zip Code 03842-2121

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

Name of Employer State of New Hampshire Occupation Representative

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2005

Transaction ID: C71336

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Molly M Kelly

Mailing Address 89 Colonial Dr

City Keene State NH Zip Code 03431-5002

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

Name of Employer American General/VALIC Occupation Financial Advisor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2005

Transaction ID: C71458

Amount of Each Receipt this Period
130.00

SUBTOTAL of Receipts This Page (optional)	430.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. John Knowles		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005
Mailing Address 51 Quail Run Dr		Transaction ID: C71202
City State Zip Code Hudson NH 03051-5067	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Technical Writer Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Mr. John Knowles		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2005
Mailing Address 51 Quail Run Dr		Transaction ID: C71423
City State Zip Code Hudson NH 03051-5067	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Technical Writer Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Mr. John Knowles		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2005
Mailing Address 51 Quail Run Dr		Transaction ID: C73471
City State Zip Code Hudson NH 03051-5067	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Technical Writer Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Sen. Sylvia B. Larsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 23 Kensington Rd		Transaction ID: C71509
City State Zip Code Concord NH 03301-2528	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of New Hampshire	Occupation State Senator	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Mr. David P. Lee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 22 Paul Ave		Transaction ID: C71409
City State Zip Code Derry NH 03038-3803	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of NH	Occupation CPA	
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Daniel Longnecker		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5
Mailing Address 5 Tyler Rd		Transaction ID: C73617
City State Zip Code Hanover NH 03755-2238	Amount of Each Receipt this Period 95.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Dartmouth College	Occupation Professor	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00	

[MEMO ITEM]
* State Party Victory Fund Memo

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Daniel Longnecker		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 5 Tyler Rd		Transaction ID: C71609	
City State Zip Code Hanover NH 03755-2238		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Dartmouth College Professor			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	

Full Name (Last, First, Middle Initial) B. Daniel Longnecker		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address 5 Tyler Rd		Transaction ID: C73618	
City State Zip Code Hanover NH 03755-2238		Amount of Each Receipt this Period 190.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Dartmouth College Professor			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	

[MEMO ITEM]
* State Party Victory Fund Memo

Full Name (Last, First, Middle Initial) C. Mr. John H. Lynch		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 5	
Mailing Address 166 Hopkins Green Rd.		Transaction ID: C71922	
City State Zip Code Hopkinton NH 03229		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation State of NH Governor			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5100.00	

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John H. Lynch

Mailing Address 166 Hopkins Green Rd.

City State Zip Code
Hopkinton NH 03229

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

Name of Employer State of NH Occupation Governor

Receipt For: 2002
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: C71516

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Hon. Moody Marcia

Mailing Address 1 Maple Street

City State Zip Code
Newmarket NH 03857

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

Name of Employer State of New Hampshire Occupation State Representative

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 5

Transaction ID: C71189

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Laurie A McCray

Mailing Address 15 Haven Road

City State Zip Code
Portsmouth NH 03801

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

Name of Employer self-employed Occupation RN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: C71465

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	5300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Kristyn Mcleod		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 35 Warren St		Transaction ID: C71492	
City State Zip Code Concord NH 03301		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Louis Karno & Company Associate			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) B. Kristyn Mcleod		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 5	
Mailing Address 35 Warren St		Transaction ID: C71548	
City State Zip Code Concord NH 03301		Amount of Each Receipt this Period 130.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Louis Karno & Company Associate			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) C. Mrs. Martha S Mcleod		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 348 Wells Rd		Transaction ID: C71505	
City State Zip Code Easton NH 03580-5157		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation North Country Health Consortium Executive Director			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional) ▶	630.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Vicki Meagher

Mailing Address 62 Heather Ct

City State Zip Code
Nashua NH 03062-4419

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

Name of Employer Occupation
Hewlett-Packard Co. Technical writer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.67

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 25 / 2005

Transaction ID: C71118

Amount of Each Receipt this Period
4.01

[MEMO ITEM]
* ASDC Partnership Program Memo

B. Full Name (Last, First, Middle Initial)
Marian Mendham

Mailing Address PO Box 89

City State Zip Code
Lyndeborough NH 03082

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 03 / 2005

Transaction ID: C73625

Amount of Each Receipt this Period
475.00

[MEMO ITEM]
* State Party Victory Fund Memo

C. Full Name (Last, First, Middle Initial)
Mr. Howard M Morse

Mailing Address PO Box 277

City State Zip Code
Amherst NH 03031-0277

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

Name of Employer Occupation
Self-Employed consultant

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2005

Transaction ID: C71168

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Howard M Morse		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2005	
Mailing Address PO Box 277		Transaction ID: C71361	
City Amherst	State NH	Zip Code 03031-0277	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation consultant		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mr. Howard M Morse		Date of Receipt M M / D D / Y Y Y Y 12 / 22 / 2005	
Mailing Address PO Box 277		Transaction ID: C73468	
City Amherst	State NH	Zip Code 03031-0277	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation consultant		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mr. Francis J Moynihan		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2005	
Mailing Address 725 Lafayette Rd		Transaction ID: C71330	
City Hampton	State NH	Zip Code 03842	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Nick Paindiris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 119 Butler Drive		Transaction ID: C71439	
City State Zip Code Glastonbury CT 06033		Amount of Each Receipt this Period 305.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) B. Ms. Lenore Patton		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 5	
Mailing Address 78 Hayden Circle		Transaction ID: C71360	
City State Zip Code Hampton NH 03842-1169		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer retired Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation retired Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Ms. Bernadette P. Pelczar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1147 Short Falls Rd		Transaction ID: C71408	
City State Zip Code Epsom NH 03234-4318		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Casey Family Services Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Best efforts made. Information not pro Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	455.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Corey S. Pouliot		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 126 N State Street		Transaction ID: C71473
City State Zip Code Concord NH 03301	Amount of Each Receipt this Period 129.98	
FEC ID number of contributing federal political committee. C		
Name of Employer State Farm	Occupation Insurance Agent	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.76	

Full Name (Last, First, Middle Initial) B. Mr. Corey S. Pouliot		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 126 N State Street		Transaction ID: C71550
City State Zip Code Concord NH 03301	Amount of Each Receipt this Period 143.78	
FEC ID number of contributing federal political committee. C		
Name of Employer State Farm	Occupation Insurance Agent	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.76	

Full Name (Last, First, Middle Initial) C. Joseph S Ransmeier		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5
Mailing Address 79 Briar Hill Rd		Transaction ID: C71285
City State Zip Code Hopkinton NH 03229-2867	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ransmeier & Spellman	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 670.00	

SUBTOTAL of Receipts This Page (optional) ▶	373.76
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Joseph S Ransmeier		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2005
Mailing Address 79 Briar Hill Rd		Transaction ID: C73608
City Hopkinton	State NH	Zip Code 03229-2867
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 285.00
Name of Employer Ransmeier & Spellman	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 670.00	
[MEMO ITEM] * State Party Victory Fund Memo		

Full Name (Last, First, Middle Initial) B. Joseph S Ransmeier		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2005
Mailing Address 79 Briar Hill Rd		Transaction ID: C73673
City Hopkinton	State NH	Zip Code 03229-2867
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 285.00
Name of Employer Ransmeier & Spellman	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 670.00	
[MEMO ITEM] * State Party Victory Fund Memo		

Full Name (Last, First, Middle Initial) C. Thoreau Raymond		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005
Mailing Address 33 Christian Ave		Transaction ID: C71305
City Concord	State NH	Zip Code 03301-6128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer N/A	Occupation retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1010.00	

SUBTOTAL of Receipts This Page (optional) ▶	10.00
TOTAL This Period (last page this line number only) ▶	10.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Judy E. Reardon

Mailing Address 768 Hanover St

City State Zip Code
Manchester NH 03104-5414

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

Name of Employer Dupont Group Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

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

Transaction ID: C71504

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Unitemized Receipts

Mailing Address c/o DNC
430 Capitol St. SE

City State Zip Code
Washington DC 20003

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20419.30

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

Transaction ID: C73615

Amount of Each Receipt this Period
3344.95

[MEMO ITEM]
* State Party Victory Fund

C. Full Name (Last, First, Middle Initial)
Unitemized Receipts

Mailing Address c/o DNC
430 Capitol St. SE

City State Zip Code
Washington DC 20003

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20419.30

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: C73674

Amount of Each Receipt this Period
6141.75

[MEMO ITEM]
* State Party Victory Fund

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms Cindy Rosenwald

Mailing Address 101 Wellington St

City State Zip Code
Nashua NH 03064-1616

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

Name of Employer Occupation
UMass Lowell Adjunct Faculty

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1093.84

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2005

Transaction ID: C71304

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Hon. Patricia T. Russell

Mailing Address 449 Park Ave

City State Zip Code
Keene NH 03431-1565

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

Name of Employer Occupation
State of NH Liquor Commissioner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2005

Transaction ID: C71240

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Hon. Patricia T. Russell

Mailing Address 449 Park Ave

City State Zip Code
Keene NH 03431-1565

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

Name of Employer Occupation
State of NH Liquor Commissioner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2005

Transaction ID: C71298

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 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 40 / 194

(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. James Ryan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 11 Cricket Hill Way		Transaction ID: C71450	
City State Zip Code Franklin NH 03235	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Yankee Book Peddler	Occupation Library Services		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		

Full Name (Last, First, Middle Initial) B. Dr. William C Siroty		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 3 / 2 0 0 5	
Mailing Address 8 Sprague Rd		Transaction ID: C71327	
City State Zip Code Amherst NH 03031-3237	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Harvard Pilgrim Health Care	Occupation Physician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00		

Full Name (Last, First, Middle Initial) C. Jeffrey Smulyan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 5	
Mailing Address 5101 Green Braes E. Dr.		Transaction ID: C71544	
City State Zip Code Indianapolis IN 46234	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Emmis Communications	Occupation CEO		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶

5900.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mrs. Dorothy Solomon		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2005	
Mailing Address PO Box 993		Transaction ID: C71167	
City Albany	State NH	Amount of Each Receipt this Period 40.00	
Zip Code 03818-0993			
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation Retired Teacher		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00		

Full Name (Last, First, Middle Initial) B. Mrs. Dorothy Solomon		Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2005	
Mailing Address PO Box 993		Transaction ID: C71437	
City Albany	State NH	Amount of Each Receipt this Period 40.00	
Zip Code 03818-0993			
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation Retired Teacher		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00		

Full Name (Last, First, Middle Initial) C. Mrs. Dorothy Solomon		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2005	
Mailing Address PO Box 993		Transaction ID: C73464	
City Albany	State NH	Amount of Each Receipt this Period 40.00	
Zip Code 03818-0993			
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation Retired Teacher		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Kathleen N. Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 192 S Mammoth Rd		Transaction ID: C71394	
City State Zip Code Manchester NH 03109-4908	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Wadleigh, Starr & Peters	Occupation attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. Mr. Abner Taub		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 104 Peele Rd		Transaction ID: C71469	
City State Zip Code Nashua NH 03062-2522	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lahey Hitchcock Clinic	Occupation Pediatrician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mary Tetreau		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 15 Isabella Drive		Transaction ID: C71419	
City State Zip Code Londonderry NH 03053	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Museum Search & Reference	Occupation Executive Assistant		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Karen Jean Thulin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 60 Franklin St		Transaction ID: C71621	
City State Zip Code Derry NH 03038		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Kathryn Grace Administrative Assistant			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) B. Hon. Jacquelyne K. Weatherspoon		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 5	
Mailing Address 53 Court St		Transaction ID: C71335	
City State Zip Code Exeter NH 03833-2718		Amount of Each Receipt this Period 240.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Employed Consultant			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard H. Webb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 522 Stagecoach Rd		Transaction ID: C73624	
City State Zip Code Sunapee NH 03782-3900		Amount of Each Receipt this Period 285.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	

[MEMO ITEM]
* State Party Victory Fund Memo

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 194
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Nathan S Webster		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 192 Winnicutt Rd		Transaction ID: C71228
City Stratham	State NH	Zip Code 03885
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Sales	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Carden N Welsh		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 1 / 2 0 0 5
Mailing Address 3 Fairchild Dr		Transaction ID: C73612
City Durham	State NH	Zip Code 03824-1945
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 237.50
Name of Employer Timberland Co.	Occupation Businessman	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	[MEMO ITEM] * State Party Victory Fund Memo

Full Name (Last, First, Middle Initial) C. Hon. Katherine W. Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 27 Mill Rd		Transaction ID: C71276
City Durham	State NH	Zip Code 03824-3006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Not Employed	Occupation Not Employed	
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 194
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Rawson L. Wood		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2005	
Mailing Address PO Box 502		Transaction ID: C71344	
City State Zip Code Center Harbor NH 03226-0502		Amount of Each Receipt this Period 8000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 8000.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Wyman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2005	
Mailing Address PO Box 6		Transaction ID: C71353	
City State Zip Code N Sandwich NH 03259-0006		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 378.75	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Wyman		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2005	
Mailing Address PO Box 6		Transaction ID: C71497	
City State Zip Code N Sandwich NH 03259-0006		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 378.75	

SUBTOTAL of Receipts This Page (optional) ▶	8165.00
TOTAL This Period (last page this line number only) ▶	54103.76

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

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

FOR LINE NUMBER: PAGE 46 / 194
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)
A. AFSCME-P.E.O.P.L.E. - Qualified/Federal Account

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: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: C73444

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. American Federation of Teachers Cmte on Political Education

Mailing Address 555 New Jersey Ave NW

City State Zip Code
Washington DC 20001-2029

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 5

Transaction ID: C73441

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Clemons for Congress

Mailing Address PO Box 4373

City State Zip Code
Windham NH 03087

FEC ID number of contributing federal political committee. **C** C00416248

Name of Employer Occupation

Receipt For: 2002
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: C71518

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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

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

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

FOR LINE NUMBER: PAGE 47 / 194
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Duffy for Congress

Mailing Address 103 Bay Street

City State Zip Code
Manchester NH 03104

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

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

Transaction ID: C71441

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Forward Together PAC

Mailing Address 6846 Old Dominion Drive
Suite 222

City State Zip Code
McLean VA 22101-3724

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

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

Transaction ID: C73135

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
Friends of Rahm Emanuel

Mailing Address PO Box 101124

City State Zip Code
Chicago IL 60610

FEC ID number of contributing federal political committee. **C** C00368829

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: C71530

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **11300.00**

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

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

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

FOR LINE NUMBER: PAGE 48 / 194
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Keeping America's Promise, INC
Mailing Address 511 C Street NE
City State Zip Code
Washington DC 20002
FEC ID number of contributing federal political committee. **C** C00409508
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2005
Transaction ID: C70376
Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
Nat'l Education Assn
Mailing Address 1201 16th St Nw
Suite 421
City State Zip Code
Washington DC 20036-3207
FEC ID number of contributing federal political committee. **C** C70000492
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2005
Transaction ID: C71290
Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
WellPoint, Inc. WELLPAC
Mailing Address 120 Monument Circle
City State Zip Code
Indianapolis IN 46278-4903
FEC ID number of contributing federal political committee. **C** C00197228
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 16 / 2005
Transaction ID: C71312
Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	17500.00
TOTAL This Period (last page this line number only)	39800.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2005	
Mailing Address 430 S Capitol St SE		Transaction ID: C70390	
City State Zip Code Washington DC 20003-4024	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Political Committee			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. ASDC Partnership Program		Date of Receipt M M / D D / Y Y Y Y Y 07 / 29 / 2005	
Mailing Address 430 S. Capitol Street, SE		Transaction ID: C71164	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 647.41		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1597.91	
		2nd Quarter Transfer	

Full Name (Last, First, Middle Initial) C. ASDC Partnership Program		Date of Receipt M M / D D / Y Y Y Y Y 10 / 28 / 2005	
Mailing Address 430 S. Capitol Street, SE		Transaction ID: C71517	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 567.99		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1597.91	
		3rd Quarter Transfer	

SUBTOTAL of Receipts This Page (optional) ▶	1615.40
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 194
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Mrs. Debra E. Crapo Mailing Address 8 Big Rock Rd City Rye State NH Zip Code 03870-2607 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5 Transaction ID: C73710 Amount of Each Receipt this Period 61.40
Name of Employer Self-Employed Occupation Real Estate Broker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.40		[MEMO ITEM] * ASDC Partnership Program Memo

B. Full Name (Last, First, Middle Initial) Democratic National Committee Mailing Address 430 S Capitol St SE City Washington State DC Zip Code 20003-4024 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 5 Transaction ID: C70389 Amount of Each Receipt this Period 1702.18
Name of Employer Occupation Political Committee Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12077.10		State Party Victory Fund Transfer

C. Full Name (Last, First, Middle Initial) Democratic National Committee Mailing Address 430 S Capitol St SE City Washington State DC Zip Code 20003-4024 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5 Transaction ID: C71549 Amount of Each Receipt this Period 4393.96
Name of Employer Occupation Political Committee Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12077.10		State Party Victory Fund Transfer

SUBTOTAL of Receipts This Page (optional)	6096.14
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Harley G. Featherston		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2005	
Mailing Address 16 Pleasant St		Transaction ID: C71125	
City State Zip Code Salem NH 03079-2907	Amount of Each Receipt this Period 54.27		
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 521.76		
[MEMO ITEM] * ASDC Partnership Program Memo			

Full Name (Last, First, Middle Initial) B. Ms Cindy Rosenwald		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2005	
Mailing Address 101 Wellington St		Transaction ID: C71126	
City State Zip Code Nashua NH 03064-1616	Amount of Each Receipt this Period 49.61		
FEC ID number of contributing federal political committee. C			
Name of Employer UMass Lowell	Occupation Adjunct Faculty		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1093.84		
[MEMO ITEM] * ASDC Partnership Program Memo			

Full Name (Last, First, Middle Initial) C. Mr. Harley G. Featherston		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2005	
Mailing Address 16 Pleasant St		Transaction ID: C73688	
City State Zip Code Salem NH 03079-2907	Amount of Each Receipt this Period 8.90		
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 521.76		
[MEMO ITEM] * ASDC Partnership Program Memo			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Harley G. Featherston		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 16 Pleasant St		Transaction ID: C73718	
City State Zip Code Salem NH 03079-2907	Amount of Each Receipt this Period 8.59		
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 521.76		
[MEMO ITEM] * ASDC Partnership Program Memo			

Full Name (Last, First, Middle Initial) B. Ms. Vicki Meagher		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 5	
Mailing Address 62 Heather Ct		Transaction ID: C73682	
City State Zip Code Nashua NH 03062-4419	Amount of Each Receipt this Period 13.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Hewlett-Packard Co.	Occupation Technical writer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.67		
[MEMO ITEM] * ASDC Partnership Program Memo			

Full Name (Last, First, Middle Initial) C. Ms. Vicki Meagher		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 62 Heather Ct		Transaction ID: C73713	
City State Zip Code Nashua NH 03062-4419	Amount of Each Receipt this Period 11.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Hewlett-Packard Co.	Occupation Technical writer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.67		
[MEMO ITEM] * ASDC Partnership Program Memo			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Unitemized Receipts		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address c/o ASDC 430 S. Capitol Street, SE		Transaction ID: C73736
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 631.10	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * 3rd Quarter Gross Amt Rcvd
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 2205.58	

Full Name (Last, First, Middle Initial) B. Unitemized Receipts		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2005
Mailing Address c/o ASDC 430 S. Capitol Street, SE		Transaction ID: C73737
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 420.40	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * 4th Quarter Gross Amt Rcvd
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 2205.58	

Full Name (Last, First, Middle Initial) C. Ms Cindy Rosenwald		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address 101 Wellington St		Transaction ID: C73689
City State Zip Code Nashua NH 03064-1616	Amount of Each Receipt this Period 29.49	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * ASDC Partnership Program Memo
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Adjunct Faculty Aggregate Year-to-Date ▼ 1093.84	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 194
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms Cindy Rosenwald

Mailing Address 101 Wellington St

City State Zip Code
Nashua NH 03064-1616

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

Name of Employer Occupation
UMass Lowell Adjunct Faculty

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1093.84

Date of Receipt

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

Transaction ID: C73719

Amount of Each Receipt this Period
14.74

[MEMO ITEM]
* ASDC Partnership Program Memo

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	7711.54

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

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

FOR LINE NUMBER: PAGE 55 / 194
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Abar Hutton Media LLC

Mailing Address 1029 N Royal St
#300

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6414.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	5

Transaction ID: C71262

Amount of Each Receipt this Period
6414.99

Refund Check

B. Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address PO Box 149195

City State Zip Code
Austin TX 78714-9195

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
749.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	0	5

Transaction ID: C70375

Amount of Each Receipt this Period
306.35

Refund

C. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 15123

City State Zip Code
Albany NY 12212-5123

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29018.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	0	5

Transaction ID: C70374

Amount of Each Receipt this Period
500.00

Refund of Deposit

SUBTOTAL of Receipts This Page (optional) ► **7221.34**

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

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

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

FOR LINE NUMBER: PAGE 56 / 194
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 15123

City Albany State NY Zip Code 12212-5123

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29018.56

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 8 / 2 0 0 5

Transaction ID: C71232

Amount of Each Receipt this Period
1036.43

Refund

B. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 15123

City Albany State NY Zip Code 12212-5123

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29018.56

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 8 / 2 0 0 5

Transaction ID: C71230

Amount of Each Receipt this Period
.10

Refund

C. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 15123

City Albany State NY Zip Code 12212-5123

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29018.56

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 8 / 2 0 0 5

Transaction ID: C71231

Amount of Each Receipt this Period
194.62

Refund

SUBTOTAL of Receipts This Page (optional) ► **1231.15**

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

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

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

FOR LINE NUMBER: PAGE 57 / 194

(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2005	
Mailing Address PO Box 15123		Transaction ID: C71233	
City Albany	State NY	Zip Code 12212-5123	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Refund	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29018.56		
Full Name (Last, First, Middle Initial) B. Verizon		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2005	
Mailing Address PO Box 15123		Transaction ID: C71449	
City Albany	State NY	Zip Code 12212-5123	Amount of Each Receipt this Period 1480.45
FEC ID number of contributing federal political committee. C		Refund	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29018.56		

SUBTOTAL of Receipts This Page (optional)	1580.45
TOTAL This Period (last page this line number only)	10032.94

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 194
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Astro Research, Inc.

Mailing Address 974 NW Circle Blvd

City State Zip Code
Corvallis OR 97330-1410

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2391.34

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

Transaction ID: C71508

Amount of Each Receipt this Period
2391.34

NHDP Voter File

B. Full Name (Last, First, Middle Initial)
Citizens Bank

Mailing Address 1 Capital Plz

City State Zip Code
Concord NH 03301-4900

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
389.92

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 5

Transaction ID: C73479

Amount of Each Receipt this Period
20.04

Account Interest

C. Full Name (Last, First, Middle Initial)
Citizens Bank

Mailing Address 1 Capital Plz

City State Zip Code
Concord NH 03301-4900

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
389.92

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 5

Transaction ID: C73497

Amount of Each Receipt this Period
34.72

Account Interest

SUBTOTAL of Receipts This Page (optional)	▶	2446.10
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2005	
Mailing Address 1 Capital Plz		Transaction ID: C73498	
City State Zip Code Concord NH 03301-4900	Amount of Each Receipt this Period 34.02		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation		Account Interest	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 389.92	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2005	
Mailing Address 1 Capital Plz		Transaction ID: C73553	
City State Zip Code Concord NH 03301-4900	Amount of Each Receipt this Period 32.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation		Account Interest	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 389.92	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2005	
Mailing Address 1 Capital Plz		Transaction ID: C73507	
City State Zip Code Concord NH 03301-4900	Amount of Each Receipt this Period 28.37		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation		Account Interest	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 389.92	

SUBTOTAL of Receipts This Page (optional) ▶	95.25
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 60 / 194	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Citizens Bank

Mailing Address 1 Capital Plz

City State Zip Code
Concord NH 03301-4900

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Transaction ID: C73508

Amount of Each Receipt this Period

Account Interest

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="29.42"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2570.77"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. American Printing and Mailing		Transaction ID: D7434 Date of Disbursement
Mailing Address 1606 Headway Circle		<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City Austin	State TX	Zip Code 78754
Purpose of Disbursement Printing of Brochures	<input type="text" value="332.78"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Anthem Blue Cross and Blue Shield		Transaction ID: D7435 Date of Disbursement
Mailing Address 3000 Goffs Falls Rd		<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City Manchester	State NH	Zip Code 03101
Purpose of Disbursement Health Insurance	<input type="text" value="652.32"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Anthem Blue Cross and Blue Shield		Transaction ID: D7516 Date of Disbursement
Mailing Address 3000 Goffs Falls Rd		<input type="text" value="08"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City Manchester	State NH	Zip Code 03101
Purpose of Disbursement Health Insurance	<input type="text" value="652.32"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1637.42"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. ASDC Partnership Program		Transaction ID: D7979 Date of Disbursement																					
Mailing Address 430 S. Capitol Street, SE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	9		2	0	0	5														
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Program Dues		Category/ Type	450.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. ASDC Partnership Program		Transaction ID: D7980 Date of Disbursement																					
Mailing Address 430 S. Capitol Street, SE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	1		2	0	0	5														
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Program Dues		Category/ Type	450.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. Rick Boylan		Transaction ID: D7430 Date of Disbursement																					
Mailing Address 205 Isle Drive St.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	7		2	0	0	5														
City St. Pete Beach	State FL	Zip Code 33706	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting: Strategic		Category/ Type	2000.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	2900.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Rick Boylan		Transaction ID: D7517 Date of Disbursement 08 / 10 / 2005	
Mailing Address 205 Isle Drive St.		Amount of Each Disbursement this Period 2000.00	
City St. Pete Beach State FL Zip Code 33706	Purpose of Disbursement Consulting: Strategic	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Center of New Hampshire Radisson		Transaction ID: D7624 Date of Disbursement 10 / 28 / 2005	
Mailing Address 700 Elm St		Amount of Each Disbursement this Period 10389.91	
City Manchester State NH Zip Code 03101-2523	Purpose of Disbursement Catering for Annual Dinner	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Center of New Hampshire Radisson		Transaction ID: D7698 Date of Disbursement 12 / 23 / 2005	
Mailing Address 700 Elm St		Amount of Each Disbursement this Period 500.00	
City Manchester State NH Zip Code 03101-2523	Purpose of Disbursement Deposit for Room Rental	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	12889.91
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7428 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 5
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2826.68
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7459 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 5
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2618.42
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7476 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 5
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 208.28
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5653.38
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 194

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7478 Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 25.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7480 Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 5.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7481 Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 26.18
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	56.18
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7482 Date of Disbursement 07 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 9.62	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7483 Date of Disbursement 07 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period .07	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7484 Date of Disbursement 07 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 129.18	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	138.87
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7479 Date of Disbursement 07 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 10.00	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7504 Date of Disbursement 08 / 02 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 10.00	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7505 Date of Disbursement 08 / 02 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 208.28	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	228.28
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7506 Date of Disbursement 08 / 03 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 5.00	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7507 Date of Disbursement 08 / 05 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2211.28	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7548 Date of Disbursement 08 / 19 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2618.38	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4834.66
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7556 Date of Disbursement 08 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 83.15	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7557 Date of Disbursement 08 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 13.90	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7558 Date of Disbursement 08 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 3.24	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	100.29
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7559 Date of Disbursement 08 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 25.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7560 Date of Disbursement 08 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 136.53
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7569 Date of Disbursement 09 / 02 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2618.42
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2779.95
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7575 Date of Disbursement 09 / 13 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 3003.78	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7582 Date of Disbursement 09 / 28 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2924.88	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7591 Date of Disbursement 09 / 30 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 10.00	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5938.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7592 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 5.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7593 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 25.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7594 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 71.78
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	101.78
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7595 Date of Disbursement 09 / 30 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 11.60	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7596 Date of Disbursement 09 / 30 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 4.17	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7597 Date of Disbursement 09 / 30 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 141.58	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	157.35
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7600 Date of Disbursement 10 / 12 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2584.64	
City Concord	State NH	Zip Code 03301-4900	
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7617 Date of Disbursement 10 / 25 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2792.86	
City Concord	State NH	Zip Code 03301-4900	
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7625 Date of Disbursement 10 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 330.26	
City Concord	State NH	Zip Code 03301-4900	
Purpose of Disbursement Bank Fees		Category/ Type	
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	5707.76
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7626 Date of Disbursement 11 / 07 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2486.38	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7642 Date of Disbursement 11 / 19 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2486.42	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7648 Date of Disbursement 11 / 30 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 375.15	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Charges Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5347.95
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7656 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2486.42
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7681 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 5
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 55.43
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes-FUTA Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7680 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 5
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 2842.88
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5384.73
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7703 Date of Disbursement 12 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 5.00	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7702 Date of Disbursement 12 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 10.00	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7708 Date of Disbursement 12 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 135.20	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.20
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7707 Date of Disbursement 12 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period .11
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D7704 Date of Disbursement 12 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 25.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D7705 Date of Disbursement 12 / 31 / 2005
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 20.19
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	45.30
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D7706 Date of Disbursement 12 / 31 / 2005	
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 16.01	
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fee	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Mr. Nick M Clemons		Transaction ID: D7461 Date of Disbursement 07 / 22 / 2005	
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94	
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Mr. Nick M Clemons		Transaction ID: D7508 Date of Disbursement 08 / 05 / 2005	
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94	
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	4559.89
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Nick M Clemons		Transaction ID: D7549 Date of Disbursement 08 / 19 / 2005	
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.96	
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Nick M Clemons		Transaction ID: D7570 Date of Disbursement 09 / 02 / 2005	
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94	
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Nick M Clemons		Transaction ID: D7576 Date of Disbursement 09 / 16 / 2005	
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94	
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	6815.84
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Nick M Clemons		Transaction ID: D7585 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.96
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Mr. Nick M Clemons		Transaction ID: D7611 Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mr. Nick M Clemons		Transaction ID: D7618 Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6815.84
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Nick M Clemons		Transaction ID: D7632 Date of Disbursement 11 / 11 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.96
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mr. Nick M Clemons		Transaction ID: D7643 Date of Disbursement 11 / 23 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mr. Nick M Clemons		Transaction ID: D7664 Date of Disbursement 12 / 09 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.94
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6815.84
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Nick M Clemons		Transaction ID: D7682 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 2271.95
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Colin Van Ostern		Transaction ID: D7432 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 5
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 1650.00
City Concord State NH Zip Code 03301-4322	Purpose of Disbursement Consulting: Communications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Colin Van Ostern		Transaction ID: D7452 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 5
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 1650.00
City Concord State NH Zip Code 03301-4322	Purpose of Disbursement Consulting: Communications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5571.95
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Colin Van Ostern		Transaction ID: D7468 Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2005
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 1650.00
City Concord State NH Zip Code 03301-4322	Category/ Type	
Purpose of Disbursement Consulting: Communications		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Colin Van Ostern		Transaction ID: D7544 Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2005
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 1650.00
City Concord State NH Zip Code 03301-4322	Category/ Type	
Purpose of Disbursement Consulting: Communications		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Colin Van Ostern		Transaction ID: D7584 Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2005
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 1523.06
City Concord State NH Zip Code 03301-4322	Category/ Type	
Purpose of Disbursement Consulting: Communications		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4823.06
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Colin Van Ostern		Transaction ID: D7608 Date of Disbursement 10 / 13 / 2005
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 1523.06
City Concord State NH Zip Code 03301-4322	Purpose of Disbursement Consulting: Communications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Comcast		Transaction ID: D7447 Date of Disbursement 07 / 14 / 2005
Mailing Address PO Box 196		Amount of Each Disbursement this Period 68.59
City Newark State NJ Zip Code 07101-0196	Purpose of Disbursement Cable TV Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Comcast		Transaction ID: D7540 Date of Disbursement 08 / 17 / 2005
Mailing Address PO Box 196		Amount of Each Disbursement this Period 68.59
City Newark State NJ Zip Code 07101-0196	Purpose of Disbursement Cable TV Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1660.24
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Davis Towle Morrill Full Name (Last, First, Middle Initial) Mailing Address 115 Airport Rd PO Box 1260 City Concord State NH Zip Code 03301-7300 Purpose of Disbursement Liability Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D7433 Date of Disbursement 07 / 07 / 2005 Amount of Each Disbursement this Period 235.00 Category/Type
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B. Davis Towle Morrill Full Name (Last, First, Middle Initial) Mailing Address 115 Airport Rd PO Box 1260 City Concord State NH Zip Code 03301-7300 Purpose of Disbursement Liability Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D7475 Date of Disbursement 07 / 28 / 2005 Amount of Each Disbursement this Period 255.00 Category/Type
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C. Davis Towle Morrill Full Name (Last, First, Middle Initial) Mailing Address 115 Airport Rd PO Box 1260 City Concord State NH Zip Code 03301-7300 Purpose of Disbursement Liability Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D7542 Date of Disbursement 08 / 17 / 2005 Amount of Each Disbursement this Period 204.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	694.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

<p>A. Davis Towle Morrill</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 115 Airport Rd PO Box 1260</p> <p>City Concord State NH Zip Code 03301-7300</p> <p>Purpose of Disbursement Liability Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D7603</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="204.00"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>B. De Lage Landen</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 41601</p> <p>City Philadelphia State PA Zip Code 19101</p> <p>Purpose of Disbursement Photocopier Rental Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D7457</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="503.86"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>C. De Lage Landen</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 41601</p> <p>City Philadelphia State PA Zip Code 19101</p> <p>Purpose of Disbursement Photocopier Rental Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D7539</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="503.86"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1211.72"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Delta Dental		Transaction ID: D7456 Date of Disbursement MM / DD / YYYY 07 / 21 / 2005	
Mailing Address PO Box 9566		Amount of Each Disbursement this Period 125.16	
City Manchester	State NH	Zip Code 03108-9566	
Purpose of Disbursement Dental Insurance		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Delta Dental		Transaction ID: D8360 Date of Disbursement MM / DD / YYYY 11 / 16 / 2005	
Mailing Address PO Box 9566		Amount of Each Disbursement this Period 176.70	
City Manchester	State NH	Zip Code 03108-9566	
Purpose of Disbursement Dental Insurance		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Diane Churas		Transaction ID: D7915 Date of Disbursement MM / DD / YYYY 12 / 20 / 2005	
Mailing Address 55 Pleasant Street		Amount of Each Disbursement this Period 255.64	
City Concord	State NH	Zip Code 03301	
Purpose of Disbursement Court Transcripts		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	557.50
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Dumez		Transaction ID: D7460 Date of Disbursement 07 / 22 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.47	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Brian Dumez		Transaction ID: D7509 Date of Disbursement 08 / 05 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.46	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brian Dumez		Transaction ID: D7550 Date of Disbursement 08 / 19 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.46	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2284.39
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Dumez		Transaction ID: D7571 Date of Disbursement 09 / 02 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.47	
City Portsmouth	State NH	Zip Code 03801	Category/ Type
Purpose of Disbursement Payroll Expenses		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Brian Dumez		Transaction ID: D7577 Date of Disbursement 09 / 16 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.46	
City Portsmouth	State NH	Zip Code 03801	Category/ Type
Purpose of Disbursement Payroll Expense		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Brian Dumez		Transaction ID: D7586 Date of Disbursement 09 / 30 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.47	
City Portsmouth	State NH	Zip Code 03801	Category/ Type
Purpose of Disbursement Payroll Expense		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2284.40
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Dumez		Transaction ID: D7612 Date of Disbursement 10 / 14 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.46	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expense Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Brian Dumez		Transaction ID: D7619 Date of Disbursement 10 / 28 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.47	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expense Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brian Dumez		Transaction ID: D7633 Date of Disbursement 11 / 11 / 2005	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.46	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expense Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2284.39
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Dumez		Transaction ID: D7644 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.47	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expense Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Brian Dumez		Transaction ID: D7665 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.46	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brian Dumez		Transaction ID: D7683 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 761.47	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2284.40
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

<p>A. Evergreen Press</p> <p>Full Name (Last, First, Middle Initial) Evergreen Press</p> <p>Mailing Address 60 Rogers St</p> <p>City Manchester State NH Zip Code 03103-5070</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D7437</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="426.00"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Evergreen Press</p> <p>Full Name (Last, First, Middle Initial) Evergreen Press</p> <p>Mailing Address 60 Rogers St</p> <p>City Manchester State NH Zip Code 03103-5070</p> <p>Purpose of Disbursement Printing of Letterhead</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D7445</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1498.00"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Factotum Productions</p> <p>Full Name (Last, First, Middle Initial) Factotum Productions</p> <p>Mailing Address 95 N Main St</p> <p>City Westford State MA Zip Code 01886-1211</p> <p>Purpose of Disbursement Consulting: Database Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D7429</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3924.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. G4 Communications		Transaction ID: D7455 Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2005
Mailing Address PO Box 10722		Amount of Each Disbursement this Period 105.93
City Bedford State NH Zip Code 03110	Purpose of Disbursement Internet Provider Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. G4 Communications		Transaction ID: D7535 Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2005
Mailing Address PO Box 10722		Amount of Each Disbursement this Period 105.93
City Bedford State NH Zip Code 03110	Purpose of Disbursement Internet Provider Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. G4 Communications		Transaction ID: D7605 Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2005
Mailing Address PO Box 10722		Amount of Each Disbursement this Period 105.93
City Bedford State NH Zip Code 03110	Purpose of Disbursement Internet Provider Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	317.79
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Gordon & Schwenkmeyer		Transaction ID: D7922	
Mailing Address 300 N Sepulveda Blvd		Date of Disbursement MM / DD / YYYY 07 / 31 / 2005	
City El Segundo	State CA	Zip Code 90245-4477	Amount of Each Disbursement this Period 3126.56
Purpose of Disbursement Telemarketing Fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Gordon & Schwenkmeyer		Transaction ID: D7921	
Mailing Address 300 N Sepulveda Blvd		Date of Disbursement MM / DD / YYYY 08 / 31 / 2005	
City El Segundo	State CA	Zip Code 90245-4477	Amount of Each Disbursement this Period 4063.72
Purpose of Disbursement Telemarketing Fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Gordon & Schwenkmeyer		Transaction ID: D7920	
Mailing Address 300 N Sepulveda Blvd		Date of Disbursement MM / DD / YYYY 09 / 30 / 2005	
City El Segundo	State CA	Zip Code 90245-4477	Amount of Each Disbursement this Period 16.00
Purpose of Disbursement Telemarketing Fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	7206.28
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Gordon & Schwenkmeyer		Transaction ID: D7919 Date of Disbursement																					
Mailing Address 300 N Sepulveda Blvd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
City El Segundo	State CA	Zip Code 90245-4477																					
Purpose of Disbursement Telemarketing Fees		<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>21.40</td> </tr> </table>		Amount of Each Disbursement this Period	21.40																		
Amount of Each Disbursement this Period																							
21.40																							
Candidate Name		Category/ Type																					
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial) B. Gordon & Schwenkmeyer		Transaction ID: D7918 Date of Disbursement																					
Mailing Address 300 N Sepulveda Blvd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		3	0		2	0	0	5														
City El Segundo	State CA	Zip Code 90245-4477																					
Purpose of Disbursement Telemarketing Fees		<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>6015.40</td> </tr> </table>		Amount of Each Disbursement this Period	6015.40																		
Amount of Each Disbursement this Period																							
6015.40																							
Candidate Name		Category/ Type																					
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial) C. Gordon & Schwenkmeyer		Transaction ID: D7917 Date of Disbursement																					
Mailing Address 300 N Sepulveda Blvd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	5														
City El Segundo	State CA	Zip Code 90245-4477																					
Purpose of Disbursement Telemarketing Fees		<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>16.00</td> </tr> </table>		Amount of Each Disbursement this Period	16.00																		
Amount of Each Disbursement this Period																							
16.00																							
Candidate Name		Category/ Type																					
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

SUBTOTAL of Disbursements This Page (optional)	6052.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Janvier Holding Co.		Transaction ID: D7470 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5
Mailing Address 10 Ferry St		Amount of Each Disbursement this Period 2345.00
City Concord State NH Zip Code 03301-5022	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Janvier Holding Co.		Transaction ID: D7554 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 5
Mailing Address 10 Ferry St		Amount of Each Disbursement this Period 2345.00
City Concord State NH Zip Code 03301-5022	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Janvier Holding Co.		Transaction ID: D7583 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 5
Mailing Address 10 Ferry St		Amount of Each Disbursement this Period 2345.00
City Concord State NH Zip Code 03301-5022	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7035.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jennifer L. Kuzma		Transaction ID: D7462 Date of Disbursement 07 / 22 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1549.03	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jennifer L. Kuzma		Transaction ID: D7510 Date of Disbursement 08 / 05 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1549.04	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jennifer L. Kuzma		Transaction ID: D7551 Date of Disbursement 08 / 19 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1549.04	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4647.11
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jennifer L. Kuzma		Transaction ID: D7572 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 5
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1549.03
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ms. Jennifer L. Kuzma		Transaction ID: D7578 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 5
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1549.04
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ms. Jennifer L. Kuzma		Transaction ID: D7587 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 5
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1549.03
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

4647.10

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jennifer L. Kuzma		Transaction ID: D7613 Date of Disbursement 10 / 14 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1681.04	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jennifer L. Kuzma		Transaction ID: D7620 Date of Disbursement 10 / 28 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1681.03	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jennifer L. Kuzma		Transaction ID: D7634 Date of Disbursement 11 / 11 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1681.04	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5043.11
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jennifer L. Kuzma		Transaction ID: D7924 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1681.53	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jennifer L. Kuzma		Transaction ID: D7666 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1681.04	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jennifer L. Kuzma		Transaction ID: D7669 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 5	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 648.62	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4011.19
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jennifer L. Kuzma		Transaction ID: D7684 Date of Disbursement 12 / 20 / 2005	
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1681.04	
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. David P. Lee		Transaction ID: D7469 Date of Disbursement 07 / 28 / 2005	
Mailing Address 22 Paul Ave		Amount of Each Disbursement this Period 500.00	
City Derry State NH Zip Code 03038-3803	Purpose of Disbursement Consulting: Accounting Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LexisNexis		Transaction ID: D7446 Date of Disbursement 07 / 14 / 2005	
Mailing Address PO Box 7247-7090		Amount of Each Disbursement this Period 150.00	
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Research Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2331.04
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. LexisNexis		Transaction ID: D7541 Date of Disbursement 08 / 17 / 2005	
Mailing Address PO Box 7247-7090		Amount of Each Disbursement this Period 150.00	
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Research Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LexisNexis		Transaction ID: D7609 Date of Disbursement 10 / 13 / 2005	
Mailing Address PO Box 7247-7090		Amount of Each Disbursement this Period 150.00	
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Research Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kathleen List		Transaction ID: D7579 Date of Disbursement 09 / 16 / 2005	
Mailing Address 15 Warren Street		Amount of Each Disbursement this Period 1045.55	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1345.55
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Kathleen List		Transaction ID: D7588 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2005	
Mailing Address 15 Warren Street		Amount of Each Disbursement this Period 885.94	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kathleen List		Transaction ID: D7614 Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2005	
Mailing Address 15 Warren Street		Amount of Each Disbursement this Period 885.95	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kathleen List		Transaction ID: D7621 Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2005	
Mailing Address 15 Warren Street		Amount of Each Disbursement this Period 885.96	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2657.85
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Molloy Sound		Transaction ID: D7538 Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2005	
Mailing Address 1200 S Mammoth Rd		Amount of Each Disbursement this Period 75.00	
City Manchester State NH Zip Code 03109-5102	Purpose of Disbursement Sound Equipment Rental Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Abbe Ross		Transaction ID: D7463 Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Abbe Ross		Transaction ID: D7511 Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2395.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abbe Ross		Transaction ID: D7561 Date of Disbursement 08 / 19 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Abbe Ross		Transaction ID: D7573 Date of Disbursement 09 / 02 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Abbe Ross		Transaction ID: D7580 Date of Disbursement 09 / 16 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3480.75
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abbe Ross		Transaction ID: D7589 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2005
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ms. Abbe Ross		Transaction ID: D7615 Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2005
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ms. Abbe Ross		Transaction ID: D7622 Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2005
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3480.75
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abbe Ross		Transaction ID: D7635 Date of Disbursement 11 / 11 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Abbe Ross		Transaction ID: D7646 Date of Disbursement 11 / 23 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Abbe Ross		Transaction ID: D7667 Date of Disbursement 12 / 09 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3480.75
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abbe Ross		Transaction ID: D7685 Date of Disbursement 12 / 20 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1160.25	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sage Systems, LLC		Transaction ID: D7604 Date of Disbursement 10 / 13 / 2005	
Mailing Address PO Box 2201		Amount of Each Disbursement this Period 4500.00	
City Peabody State MA Zip Code 01960	Purpose of Disbursement Quarterly Voter File Database Fee Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sandler & Reiff, P.C.		Transaction ID: D7467 Date of Disbursement 07 / 28 / 2005	
Mailing Address 50 E St Se		Amount of Each Disbursement this Period 400.00	
City Washington State DC Zip Code 20003-2620	Purpose of Disbursement Legal Retainer Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	6060.25
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Sandra Bailey		Transaction ID: D7914 Date of Disbursement 12 / 20 / 2005	
Mailing Address 55 Pleasant Street		Amount of Each Disbursement this Period 292.99	
City Concord State NH Zip Code 03301	Purpose of Disbursement Court Transcripts Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shaheen & Gordon, PA		Transaction ID: D7472 Date of Disbursement 07 / 28 / 2005	
Mailing Address 140 Washington Street, 2nd Floor PO Box 977		Amount of Each Disbursement this Period 12.05	
City Dover State NH Zip Code 03820	Purpose of Disbursement Legal Fees Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Shaheen & Gordon, PA		Transaction ID: D7543 Date of Disbursement 08 / 17 / 2005	
Mailing Address 140 Washington Street, 2nd Floor PO Box 977		Amount of Each Disbursement this Period 498.39	
City Dover State NH Zip Code 03820	Purpose of Disbursement Legal Fees Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	803.43
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: D7473 Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 76 Fort Eddy Plaza		Amount of Each Disbursement this Period 1027.05	
City Concord State NH Zip Code 03301	Purpose of Disbursement Office Supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: D7537 Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2005	
Mailing Address 76 Fort Eddy Plaza		Amount of Each Disbursement this Period 435.32	
City Concord State NH Zip Code 03301	Purpose of Disbursement Office Supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. State of NH - UC		Transaction ID: D7465 Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 32 South Main Street		Amount of Each Disbursement this Period 323.23	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Liabilities Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1785.60
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. The Common Man		Transaction ID: D7471 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5
Mailing Address PO Box 581		Amount of Each Disbursement this Period 150.00
City Ashland State NH Zip Code 03217	Purpose of Disbursement Room Rental Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. The Common Man		Transaction ID: D7519 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 5
Mailing Address PO Box 581		Amount of Each Disbursement this Period 1062.49
City Ashland State NH Zip Code 03217	Purpose of Disbursement Catering for Event Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: D7448 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 5
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 449.00
City Manchester State NH Zip Code 03101	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1661.49
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. U.S. Postmaster		Transaction ID: D7466 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 62.00
City Manchester State NH Zip Code 03101	Purpose of Disbursement Postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D7450 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 5
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 253.58
City Albany State NY Zip Code 12212-5123	Purpose of Disbursement Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D7458 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 5
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 660.73
City Albany State NY Zip Code 12212-5123	Purpose of Disbursement Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	976.31
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D7546 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 672.11
City Albany State NY Zip Code 12212-5123		
Purpose of Disbursement Telephone Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D7545 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5	
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 220.49	
City Albany State NY Zip Code 12212-5123			
Purpose of Disbursement Telephone Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. VoiceText.com		Transaction ID: D7451 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 5	
Mailing Address 211 E 7th St		Amount of Each Disbursement this Period 36.45	
City Austin State TX Zip Code 78701-3334			
Purpose of Disbursement Conference Calling Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	929.05
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. VoiceText.com		Transaction ID: D7515 Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2005	
Mailing Address 211 E 7th St		Amount of Each Disbursement this Period 34.02	
City Austin State TX Zip Code 78701-3334	Purpose of Disbursement Conference Calling Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. VoiceText.com		Transaction ID: D7610 Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2005	
Mailing Address 211 E 7th St		Amount of Each Disbursement this Period 29.43	
City Austin State TX Zip Code 78701-3334	Purpose of Disbursement Conference Calling Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Johanna Voss		Transaction ID: D7464 Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1316.32
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Johanna Voss		Transaction ID: D7512 Date of Disbursement 08 / 05 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Johanna Voss		Transaction ID: D7553 Date of Disbursement 08 / 19 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Johanna Voss		Transaction ID: D7574 Date of Disbursement 09 / 02 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3758.61
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Johanna Voss		Transaction ID: D7581 Date of Disbursement 09 / 16 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Johanna Voss		Transaction ID: D7590 Date of Disbursement 09 / 30 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Johanna Voss		Transaction ID: D7616 Date of Disbursement 10 / 14 / 2005	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3758.61
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Johanna Voss		Transaction ID: D7623 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.88	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Johanna Voss		Transaction ID: D7636 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 5	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Johanna Voss		Transaction ID: D7647 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3758.62
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Johanna Voss		Transaction ID: D7668 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Johanna Voss		Transaction ID: D7686 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 806 Springbrook Cir.		Amount of Each Disbursement this Period 1252.87	
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Wadleigh, Starr & Peters, P.L.L.C.		Transaction ID: D7607 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 95 Market St.		Amount of Each Disbursement this Period 243.11	
City Manchester State NH Zip Code 03101	Purpose of Disbursement Legal Fees Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2748.85
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Washington Street Cafe		Transaction ID: D7514 Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2005
Mailing Address 88 Washington St		Amount of Each Disbursement this Period 574.56
City Concord State NH Zip Code 03301-4217	Purpose of Disbursement Catering for Event Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rick Boylan		Transaction ID: D7431 Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2005
Mailing Address 205 Isle Drive St.		Amount of Each Disbursement this Period 522.01
City St. Pete Beach State FL Zip Code 33706	Purpose of Disbursement Reimbursement: Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. US Airways		Transaction ID: D7492 Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2005
Mailing Address PO Box 1501		Amount of Each Disbursement this Period 218.40
City Winston Salem State NC Zip Code 27102	Purpose of Disbursement Airfare Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1096.57
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Colin Van Ostern		Transaction ID: D7453 Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2005
Mailing Address Washington Street Communications 8 Liberty St		Amount of Each Disbursement this Period 374.98
City Concord State NH Zip Code 03301-4322	Purpose of Disbursement Reimbursement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Circuit City Stores, INC		Transaction ID: D7500 Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2005
Mailing Address 270 Loudon Road		Amount of Each Disbursement this Period 374.98
City Concord State NH Zip Code 03301	Purpose of Disbursement Digital Camera & Accessories Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Mr. Nick M Clemons		Transaction ID: D7477 Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2005
Mailing Address 290 Pleasant St		Amount of Each Disbursement this Period 192.90
City Portsmouth State NH Zip Code 03801-4234	Purpose of Disbursement Reimbursement: Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	567.88
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Transaction ID: D7501 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5
Mailing Address PO Box 36647		Amount of Each Disbursement this Period 192.90
City Dallas State TX Zip Code 75235	[MEMO ITEM]	
Purpose of Disbursement Airfare Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Rick Boylan		Transaction ID: D7518 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 5
Mailing Address 205 Isle Drive St.		Amount of Each Disbursement this Period 459.43
City St. Pete Beach State FL Zip Code 33706	[MEMO ITEM]	
Purpose of Disbursement Reimbursement Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. US Airways		Transaction ID: D7563 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 5
Mailing Address PO Box 1501		Amount of Each Disbursement this Period 218.40
City Winston Salem State NC Zip Code 27102	[MEMO ITEM]	
Purpose of Disbursement Airfare Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	459.43
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. US Airways		Transaction ID: D7564 Date of Disbursement 08 / 10 / 2005	
Mailing Address PO Box 1501		Amount of Each Disbursement this Period 108.70	
City Winston Salem State NC Zip Code 27102	Purpose of Disbursement Airfare	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Ms. Abbe Ross		Transaction ID: D7601 Date of Disbursement 10 / 13 / 2005	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 37.00	
City Northfield State NH Zip Code 03276	Purpose of Disbursement Reimbursement: Stamps	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: D7602 Date of Disbursement 10 / 13 / 2005	
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 37.00	
City Manchester State NH Zip Code 03101	Purpose of Disbursement Stamps	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	37.00
TOTAL This Period (last page this line number only) ▶	194490.72

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. New Hampshire Democratic Party Non-Federal Account		Transaction ID: D7981 Date of Disbursement
Mailing Address 2 1/2 Beacon Street		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Transfer to Non Fed See Memo Text at End		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="800.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. New Hampshire Democratic Party Non-Federal Account		Transaction ID: D7985 Date of Disbursement
Mailing Address 2 1/2 Beacon Street		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Transfer to Non Fed See Memo Text at End		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1039.81"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. New Hampshire Democratic Party Non-Federal Account		Transaction ID: D7984 Date of Disbursement
Mailing Address 2 1/2 Beacon Street		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Transfer to Non Fed See Memo Text at End		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1693.58"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3533.39"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 / 194

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

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. New Hampshire Democratic Party Non-Federal Account		Transaction ID: D7982 Date of Disbursement
Mailing Address 2 1/2 Beacon Street		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Transfer to Non Fed See Memo Text at End		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="745.05"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. New Hampshire Democratic Party Non-Federal Account		Transaction ID: D7983 Date of Disbursement
Mailing Address 2 1/2 Beacon Street		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Transfer to Non Fed See Memo Text at End		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="6553.03"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 1848 Associates	Nature of Debt (Purpose): WMUR debate
Mailing Address 340 Commercial St	
City State ZIP Code Manchester NH 03101-1121	

Outstanding Balance Beginning This Period 100.00	Transaction ID: D1547	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ariel Press	Nature of Debt (Purpose): sample ballot printing
Mailing Address 26 Roxbury St	
City State ZIP Code Keene NH 03431-3265	

Outstanding Balance Beginning This Period 1276.41	Transaction ID: D1548	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1276.41

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ariel Press	Nature of Debt (Purpose): sample ballot printing
Mailing Address 26 Roxbury St	
City State ZIP Code Keene NH 03431-3265	

Outstanding Balance Beginning This Period 1276.41	Transaction ID: D749	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1276.41

1) SUBTOTALS This Period This Page (optional).....	2652.82
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bannon Research	Nature of Debt (Purpose): polling
Mailing Address 545 Boylston St	
City State ZIP Code Boston MA 02116-3606	

Outstanding Balance Beginning This Period 2000.00	Transaction ID: D1550	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Below Tobe	Nature of Debt (Purpose): voter list
Mailing Address 801 Fairfax St	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 3500.00	Transaction ID: D1551	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Below Tobe	Nature of Debt (Purpose): voter list
Mailing Address 801 Fairfax St	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 3500.00	Transaction ID: D751	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

1) SUBTOTALS This Period This Page (optional).....	9000.00
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bronco Realty	Nature of Debt (Purpose): rent
Mailing Address 922 Elm St	
City State ZIP Code Manchester NH 03101-2017	

Outstanding Balance Beginning This Period 990.00	Transaction ID: D752	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 990.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bronco Realty	Nature of Debt (Purpose): admin/rent
Mailing Address 922 Elm St	
City State ZIP Code Manchester NH 03101-2017	

Outstanding Balance Beginning This Period 990.00	Transaction ID: D1552	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 990.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chris Spirou	Nature of Debt (Purpose): admin/travel
Mailing Address 259 Whitford St	
City State ZIP Code Manchester NH 03104-2166	

Outstanding Balance Beginning This Period 676.55	Transaction ID: D1558	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 676.55

1) SUBTOTALS This Period This Page (optional).....	2656.55
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chris Spirou	Nature of Debt (Purpose): travel
Mailing Address 259 Whitford St	
City State ZIP Code Manchester NH 03104-2166	

Outstanding Balance Beginning This Period <input type="text" value="676.55"/>	Transaction ID: D757	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="676.55"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express	Nature of Debt (Purpose): admin/mail
Mailing Address PO Box 1140	
City State ZIP Code Memphis TN 38101-1140	

Outstanding Balance Beginning This Period <input type="text" value="148.75"/>	Transaction ID: D1554	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="148.75"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor John Durkin	Nature of Debt (Purpose): admin/equipment
Mailing Address 40 Longwood Dr	
City State ZIP Code Keene NH 03431-4505	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>	Transaction ID: D1553	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1825.30"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morrill & Everett	Nature of Debt (Purpose): insurance
Mailing Address 2 Capital Plz	
City State ZIP Code Concord NH 03301-4911	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: D756	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morrill & Everett	Nature of Debt (Purpose): admin/insurance
Mailing Address 2 Capital Plz	
City State ZIP Code Concord NH 03301-4911	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: D1557	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Health Policy Institute	Nature of Debt (Purpose): Health Care Form Reimburse
Mailing Address 1601 NW 114th St	
City State ZIP Code Des Moines IA 50325-7036	

Outstanding Balance Beginning This Period 1700.00	Transaction ID: D1556	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

1) SUBTOTALS This Period This Page (optional).....	▶	3700.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Health Policy Institute	Nature of Debt (Purpose): health care forum reimbursement
Mailing Address 1601 NW 114th St	
City State ZIP Code Des Moines IA 50325-7036	

Outstanding Balance Beginning This Period 1700.00	Transaction ID: D755	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Hampshire Democratic Party Non-Fed	Nature of Debt (Purpose): See Note in Memo Text
Mailing Address 2 1/2 Beacon Street	
City State ZIP Code Concord NH 03301	

Outstanding Balance Beginning This Period 800.00	Transaction ID: D8014	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NH Mailing Services	Nature of Debt (Purpose): 100C Mailing
Mailing Address 7 Perimeter Rd	
City State ZIP Code Manchester NH 03103-3343	

Outstanding Balance Beginning This Period 156.58	Transaction ID: D1555	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 156.58

1) SUBTOTALS This Period This Page (optional).....	▶	2656.58
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NH Mailing Services	Nature of Debt (Purpose): 100 Club Mailing
Mailing Address 7 Perimeter Rd	
City State ZIP Code Manchester NH 03103-3343	

Outstanding Balance Beginning This Period <input type="text" value="156.58"/>	Transaction ID: D754	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="156.58"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell Verney	Nature of Debt (Purpose): admin/reimbursement
Mailing Address 4 Nutt St	
City State ZIP Code Nashua NH 03060-5110	

Outstanding Balance Beginning This Period <input type="text" value="2029.51"/>	Transaction ID: D1560	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2029.51"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell Verney	Nature of Debt (Purpose): reimbursement
Mailing Address 4 Nutt St	
City State ZIP Code Nashua NH 03060-5110	

Outstanding Balance Beginning This Period <input type="text" value="2029.51"/>	Transaction ID: D759	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2029.51"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4215.60"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Star Graphics	Nature of Debt (Purpose): Health Care Forum Invite Design
Mailing Address PO Box 1475	
City State ZIP Code Concord NH 03302-1475	

Outstanding Balance Beginning This Period <input type="text" value="119.00"/>	Transaction ID: D1559	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="119.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Star Graphics	Nature of Debt (Purpose): health care forum invite design
Mailing Address PO Box 1475	
City State ZIP Code Concord NH 03302-1475	

Outstanding Balance Beginning This Period <input type="text" value="119.00"/>	Transaction ID: D758	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="119.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WNNE-TV	Nature of Debt (Purpose): debate media hook-up
Mailing Address PO Box 1310	
City State ZIP Code White Riv Jct VT 05001-1310	

Outstanding Balance Beginning This Period <input type="text" value="1665.00"/>	Transaction ID: D760	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1665.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1903.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER:
(check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WNNE-TV	Nature of Debt (Purpose): debate media hook-up
Mailing Address PO Box 1310	
City State ZIP Code White Riv Jct VT 05001-1310	

Outstanding Balance Beginning This Period 1665.00	Transaction ID: D1561	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1665.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xerox Corporation	Nature of Debt (Purpose): admin
Mailing Address 191 Spring St	
City State ZIP Code Lexington MA 02421-8045	

Outstanding Balance Beginning This Period 91.50	Transaction ID: D761	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xerox Corporation	Nature of Debt (Purpose): admin - copier service
Mailing Address 191 Spring St	
City State ZIP Code Lexington MA 02421-8045	

Outstanding Balance Beginning This Period 91.50	Transaction ID: D1562	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.50

1) SUBTOTALS This Period This Page (optional).....	1848.00
2) TOTALS This Period (last page this line number only).....	30457.85
3) TOTALS 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 H2 (FEC Form 3X) ALLOCATION RATIOS

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NAME OF COMMITTEE (In Full)

NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

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

ACTIVITY OR EVENT IDENTIFIER

2005 Jefferson Jackson Dinner

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

64.00 %

NONFEDERAL %

36.00 %Transaction ID:
R3

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NEW HAMPSHIRE DEMOCRATIC STATE	M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	8948.14

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	8948.14	Transaction ID: T123
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		Transaction ID:
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		Transaction ID:
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NEW HAMPSHIRE DEMOCRATIC STATE	M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5	944.57

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		944.57	Transaction ID: T124
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NEW HAMPSHIRE DEMOCRATIC STATE	M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5	2186.35

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2186.35	Transaction ID: T125
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

NAME OF ACCOUNT NEW HAMPSHIRE DEMO- CRATIC STATE	DATE OF RECEIPT M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 5010.35
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5010.35	Transaction ID: T126
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

NAME OF ACCOUNT NEW HAMPSHIRE DEMO- CRATIC STATE	DATE OF RECEIPT M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 4914.79
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4914.79	Transaction ID: T2
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	22004.20
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	22004.20

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Rick Boylan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 205 Isle Drive St.			Allocated Activity or Event Year-To-Date [27386.39]																	
City State Zip Code St. Pete Beach FL 33706			Date <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>1</td></tr> </table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>D</td><td>D</td></tr> <tr><td>1</td><td>0</td></tr> </table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>5</td></tr> </table>		M	M	1	1	D	D	1	0	Y	Y	Y	Y	2	0	0	5
M	M																			
1	1																			
D	D																			
1	0																			
Y	Y	Y	Y																	
2	0	0	5																	
Purpose of Disbursement: Consulting: Strategic		Category/ Type	Transaction ID: D7780H4																	
Activity or Event Identifier: Administrative [MEMO ITEM]																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[300.00]		[1700.00]		[2000.00]

B. Full Name (Last, First, Middle Initial) Rick Boylan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 205 Isle Drive St.			Allocated Activity or Event Year-To-Date [27386.39]																	
City State Zip Code St. Pete Beach FL 33706			Date <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>9</td></tr> </table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>8</td></tr> </table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>5</td></tr> </table>		M	M	0	9	D	D	0	8	Y	Y	Y	Y	2	0	0	5
M	M																			
0	9																			
D	D																			
0	8																			
Y	Y	Y	Y																	
2	0	0	5																	
Purpose of Disbursement: Consulting: Strategic		Category/ Type	Transaction ID: D7786H4																	
Activity or Event Identifier: Administrative [MEMO ITEM]																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[300.00]		[1700.00]		[2000.00]

C. Full Name (Last, First, Middle Initial) Rick Boylan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 205 Isle Drive St.			Allocated Activity or Event Year-To-Date [27386.39]																	
City State Zip Code St. Pete Beach FL 33706			Date <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>0</td></tr> </table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>D</td><td>D</td></tr> <tr><td>1</td><td>9</td></tr> </table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>5</td></tr> </table>		M	M	1	0	D	D	1	9	Y	Y	Y	Y	2	0	0	5
M	M																			
1	0																			
D	D																			
1	9																			
Y	Y	Y	Y																	
2	0	0	5																	
Purpose of Disbursement: Consulting: Strategic		Category/ Type	Transaction ID: D7756H4																	
Activity or Event Identifier: Administrative [MEMO ITEM]																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[300.00]		[1700.00]		[2000.00]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

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

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Rick Boylan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 205 Isle Drive St.			Allocated Activity or Event Year-To-Date 27386.39		
City St. Pete Beach	State FL	Zip Code 33706	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Consulting: Strategic			Transaction ID: D7661H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		1700.00		2000.00

B. Full Name (Last, First, Middle Initial) Center of New Hampshire Radisson			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 700 Elm St			Allocated Activity or Event Year-To-Date 0.00		
City Manchester	State NH	Zip Code 03101-2523	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Catering for Annual Dinner			Transaction ID: D7783H4		
Activity or Event Identifier: 2005 Jefferson Jackson Dinner [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
402.96		226.65		629.61

C. Full Name (Last, First, Middle Initial) Center of New Hampshire Radisson			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 700 Elm St			Allocated Activity or Event Year-To-Date 0.00		
City Manchester	State NH	Zip Code 03101-2523	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Catering for Annual Dinner			Transaction ID: D7775H4		
Activity or Event Identifier: 2005 Jefferson Jackson Dinner [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4204.11		2364.81		6568.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		1700.00		2000.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Colin Van Ostern			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Washington Street Commu			Allocated Activity or Event Year-To-Date 27386.39		
City	State	Zip Code	Date MM / DD / YYYY 09 / 15 / 2005		
Concord	NH	03301-4322	Transaction ID: D7723H4		
Purpose of Disbursement: Communications: Consulting			Category/Type		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

B. Full Name (Last, First, Middle Initial) Colin Van Ostern			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Washington Street Commu			Allocated Activity or Event Year-To-Date 27386.39		
City	State	Zip Code	Date MM / DD / YYYY 12 / 23 / 2005		
Concord	NH	03301-4322	Transaction ID: D7694H4		
Purpose of Disbursement: Consulting: Communications			Category/Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

C. Full Name (Last, First, Middle Initial) Colin Van Ostern			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Washington Street Commu			Allocated Activity or Event Year-To-Date 27386.39		
City	State	Zip Code	Date MM / DD / YYYY 12 / 07 / 2005		
Concord	NH	03301-4322	Transaction ID: D7660H4		
Purpose of Disbursement: Consulting: Communications			Category/Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
456.90		2589.22		3046.12

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Colin Van Ostern

Mailing Address
Washington Street Community St
City State Zip Code
Concord NH 03301-4322

Purpose of Disbursement:
Consulting: Communications

Activity or Event Identifier:
Administrative

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

Allocated Activity or Event Year-To-Date
27386.39

Date 11 / 16 / 2005
Transaction ID: D7637H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

B. Full Name (Last, First, Middle Initial)
Colin Van Ostern

Mailing Address
Washington Street Community St
City State Zip Code
Concord NH 03301-4322

Purpose of Disbursement:
Consulting: Communications

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
27386.39

Date 11 / 10 / 2005
Transaction ID: D7782H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

C. Full Name (Last, First, Middle Initial)
Colin Van Ostern

Mailing Address
Washington Street Community St
City State Zip Code
Concord NH 03301-4322

Purpose of Disbursement:
Consulting: Communications

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
27386.39

Date 10 / 26 / 2005
Transaction ID: D7771H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Colin Van Ostern
Mailing Address
Washington Street Community St
City State Zip Code
Concord NH 03301-4322
Purpose of Disbursement:
Consulting: Communications
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date MM / DD / YYYY
09 / 01 / 2005
Transaction ID: D7713H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.45		1294.61		1523.06

B. Full Name (Last, First, Middle Initial)
Comcast
Mailing Address
PO Box 196
City State Zip Code
Newark NJ 07101-0196
Purpose of Disbursement:
Cable TV
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date MM / DD / YYYY
11 / 10 / 2005
Transaction ID: D7629H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.28		58.31		68.59

C. Full Name (Last, First, Middle Initial)
Comcast
Mailing Address
PO Box 196
City State Zip Code
Newark NJ 07101-0196
Purpose of Disbursement:
Cable TV
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date MM / DD / YYYY
10 / 19 / 2005
Transaction ID: D7754H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.28		58.31		68.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.28		58.31		68.59

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Comcast			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 196			Allocated Activity or Event Year-To-Date 27386.39		
City Newark	State NJ	Zip Code 07101-0196	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Cable TV			Transaction ID: D7724H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.28		58.31		68.59

B. Full Name (Last, First, Middle Initial) Comcast			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 196			Allocated Activity or Event Year-To-Date 27386.39		
City Newark	State NJ	Zip Code 07101-0196	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Cable TV			Transaction ID: D7677H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.28		58.31		68.59

C. Full Name (Last, First, Middle Initial) Concord Monitor			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1177			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03302	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Newspaper Subscription			Transaction ID: D7679H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.20		176.80		208.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.48		235.11		276.59

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Concord School District			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 170 Warren St			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Concord	NH	03301-2942		
Purpose of Disbursement: Room Rental for Meeting			Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7743H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.50		331.50		390.00

B. Full Name (Last, First, Middle Initial) Davis Towle Morrill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 115 Airport Rd PO Box 1260			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Concord	NH	03301-7300		
Purpose of Disbursement: Liability Insurance			Date M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Activity or Event Identifier: Administrative			Transaction ID: D7657H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.30		86.70		102.00

C. Full Name (Last, First, Middle Initial) De Lage Landen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 41601			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Philadelphia	PA	19101		
Purpose of Disbursement: Photocopier Rental Fee			Date M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 5	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7727H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.57		428.29		503.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.30		86.70		102.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) De Lage Landen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 41601			Allocated Activity or Event Year-To-Date 27386.39	
City Philadelphia	State PA	Zip Code 19101	Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5 Transaction ID: D7770H4	
Purpose of Disbursement: Photocopier Rental Fee				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.57		428.29		503.86

B. Full Name (Last, First, Middle Initial) De Lage Landen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 41601			Allocated Activity or Event Year-To-Date 27386.39	
City Philadelphia	State PA	Zip Code 19101	Date M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5 Transaction ID: D7630H4	
Purpose of Disbursement: Photocopier Rental Fees				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.57		428.29		503.86

C. Full Name (Last, First, Middle Initial) De Lage Landen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 41601			Allocated Activity or Event Year-To-Date 27386.39	
City Philadelphia	State PA	Zip Code 19101	Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5 Transaction ID: D7691H4	
Purpose of Disbursement: Photocopier Rental Fees				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.57		428.29		503.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
151.14		856.58		1007.72

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Engraving Awards & Gifts

Mailing Address
276 Union Ave

City State Zip Code
Laconia NH 03246-3112

Purpose of Disbursement:
Awards for Annual Dinner

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
2005 Jefferson Jackson Dinner

[MEMO ITEM]

Date 11 / 10 / 2005

Transaction ID: D7781H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.40		154.35		428.75

B. Full Name (Last, First, Middle Initial)
Evergreen Press

Mailing Address
60 Rogers St

City State Zip Code
Manchester NH 03103-5070

Purpose of Disbursement:
Printing

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

27386.39

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 10 / 31 / 2005

Transaction ID: D7777H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.40		404.60		476.00

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

Mailing Address
60 Rogers St

City State Zip Code
Manchester NH 03103-5070

Purpose of Disbursement:
Printing of Letterhead

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

27386.39

Activity or Event Identifier:
Administrative

Date 12 / 01 / 2005

Transaction ID: D7654H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.65		264.35		311.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.65		264.35		311.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Factotum Productions</p> <p>Mailing Address 95 N Main St</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Westford</td> <td style="width:33%;">State MA</td> <td style="width:33%;">Zip Code 01886-1211</td> </tr> </table> <p>Purpose of Disbursement: Consulting: Database Maintenance</p> <p>Activity or Event Identifier: Administrative [MEMO ITEM]</p>	City Westford	State MA	Zip Code 01886-1211	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5</p> <p>Transaction ID: D7755H4</p>
City Westford	State MA	Zip Code 01886-1211		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		1700.00		2000.00

<p>B. Full Name (Last, First, Middle Initial) Finis Williams</p> <p>Mailing Address Attorney at Law 15 N. Main Street</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Concord</td> <td style="width:33%;">State NH</td> <td style="width:33%;">Zip Code 03301</td> </tr> </table> <p>Purpose of Disbursement: Legal Fees</p> <p>Activity or Event Identifier: Administrative</p>	City Concord	State NH	Zip Code 03301	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5</p> <p>Transaction ID: D8359H4</p>
City Concord	State NH	Zip Code 03301		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.02		102.16		120.18

<p>C. Full Name (Last, First, Middle Initial) G4 Communications</p> <p>Mailing Address PO Box 10722</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Bedford</td> <td style="width:33%;">State NH</td> <td style="width:33%;">Zip Code 03110</td> </tr> </table> <p>Purpose of Disbursement: Internet Provider</p> <p>Activity or Event Identifier: Administrative</p>	City Bedford	State NH	Zip Code 03110	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5</p> <p>Transaction ID: D7696H4</p>
City Bedford	State NH	Zip Code 03110		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.88		90.05		105.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.90		192.21		226.11

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) G4 Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 10722			Allocated Activity or Event Year-To-Date 27386.39		
City Bedford	State NH	Zip Code 03110	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Internet Provider			Transaction ID: D7653H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.88		90.05		105.93

B. Full Name (Last, First, Middle Initial) G4 Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 10722			Allocated Activity or Event Year-To-Date 27386.39		
City Bedford	State NH	Zip Code 03110	Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Internet Provider			Transaction ID: D7767H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.88		90.05		105.93

C. Full Name (Last, First, Middle Initial) Janvier Holding Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 Ferry St			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301-5022	Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Rent			Transaction ID: D7772H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
351.75		1993.25		2345.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.88		90.05		105.93

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Janvier Holding Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 Ferry St			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Concord	NH	03301-5022		
Purpose of Disbursement: Rent			Date M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Activity or Event Identifier: Administrative			Transaction ID: D7649H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
351.75		1993.25		2345.00

B. Full Name (Last, First, Middle Initial) Janvier Holding Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 Ferry St			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Concord	NH	03301-5022		
Purpose of Disbursement: Rent			Date M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 5	
Activity or Event Identifier: Administrative			Transaction ID: D7700H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
351.75		1993.25		2345.00

C. Full Name (Last, First, Middle Initial) David P. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22 Paul Ave			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Derry	NH	03038-3803		
Purpose of Disbursement: Consulting: Accounting			Date M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 5	
Activity or Event Identifier: Administrative			Transaction ID: D7701H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
778.50		4411.50		5190.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) David P. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22 Paul Ave			Allocated Activity or Event Year-To-Date 27386.39	
City Derry	State NH	Zip Code 03038-3803	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Consulting: Accounting			Transaction ID: D7651H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

B. Full Name (Last, First, Middle Initial) David P. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22 Paul Ave			Allocated Activity or Event Year-To-Date 27386.39	
City Derry	State NH	Zip Code 03038-3803	Date <input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Consulting: Accounting			Transaction ID: D7736H4	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

C. Full Name (Last, First, Middle Initial) David P. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22 Paul Ave			Allocated Activity or Event Year-To-Date 27386.39	
City Derry	State NH	Zip Code 03038-3803	Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Consulting: Accounting			Transaction ID: D7774H4	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) David P. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22 Paul Ave			Allocated Activity or Event Year-To-Date 27386.39		
City Derry	State NH	Zip Code 03038-3803	Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Consulting: Accounting			Transaction ID: D7712H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

B. Full Name (Last, First, Middle Initial) LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7247-7090			Allocated Activity or Event Year-To-Date 27386.39		
City Philadelphia	State PA	Zip Code 19170-0001	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Research Services			Transaction ID: D7725H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		127.50		150.00

C. Full Name (Last, First, Middle Initial) LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7247-7090			Allocated Activity or Event Year-To-Date 27386.39		
City Philadelphia	State PA	Zip Code 19170-0001	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Research Services			Transaction ID: D7676H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		127.50		150.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		127.50		150.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 7247-7090			Allocated Activity or Event Year-To-Date 27386.39																						
City Philadelphia	State PA	Zip Code 19170-0001	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	1	0	/	2	0	0	5																
Purpose of Disbursement: Research Services			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7779H4																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		127.50		150.00

B. Full Name (Last, First, Middle Initial) Kathleen List			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 15 Warren Street			Allocated Activity or Event Year-To-Date 27386.39																						
City Concord	State NH	Zip Code 03301	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	8	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	2	8	/	2	0	0	5																
Purpose of Disbursement: Reimbursement for Mileage			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7738H4																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.11		40.29		47.40

C. Full Name (Last, First, Middle Initial) Kathleen List			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 15 Warren Street			Allocated Activity or Event Year-To-Date 27386.39																						
City Concord	State NH	Zip Code 03301	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	9	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	1	9	/	2	0	0	5																
Purpose of Disbursement: Reimbursement: Mileage			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7766H4																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.15		68.85		81.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Kathleen List			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 15 Warren Street			Allocated Activity or Event Year-To-Date 27386.39			
City Concord	State NH	Zip Code 03301	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>			
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: D7733H4			
Activity or Event Identifier: Administrative [MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
12.78			72.42			85.20

B. Full Name (Last, First, Middle Initial) NGP Software, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 5505 Connecticut Ave Nw PMB 277			Allocated Activity or Event Year-To-Date 27386.39			
City Washington	State DC	Zip Code 20015-2601	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>			
Purpose of Disbursement: Networking/Computers			Transaction ID: D7720H4			
Activity or Event Identifier: Administrative [MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
67.50			382.50			450.00

C. Full Name (Last, First, Middle Initial) Nick Panagopolos			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 181 Youville St			Allocated Activity or Event Year-To-Date 27386.39			
City Manchester	State NH	Zip Code 03102	Date <input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2005"/>			
Purpose of Disbursement: Reimbursement: Mileage			Transaction ID: D7753H4			
Activity or Event Identifier: Administrative [MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
36.34			205.96			242.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
0.00			0.00			0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))						
FEDERAL SHARE			NONFEDERAL SHARE			TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 50 E St Se			Allocated Activity or Event Year-To-Date 27386.39																	
City State Zip Code Washington DC 20003-2620			Date <table style="display: inline-table; border: 1px solid black;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>8</td></tr></table> / <table style="display: inline-table; border: 1px solid black;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>5</td></tr></table> / <table style="display: inline-table; border: 1px solid black;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>		M	M	0	8	D	D	2	5	Y	Y	Y	Y	2	0	0	5
M	M																			
0	8																			
D	D																			
2	5																			
Y	Y	Y	Y																	
2	0	0	5																	
Purpose of Disbursement: Legal Retainer			Category/ Type																	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7711H4																	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

B. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 50 E St Se			Allocated Activity or Event Year-To-Date 27386.39																	
City State Zip Code Washington DC 20003-2620			Date <table style="display: inline-table; border: 1px solid black;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>2</td></tr></table> / <table style="display: inline-table; border: 1px solid black;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table style="display: inline-table; border: 1px solid black;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>		M	M	1	2	D	D	3	0	Y	Y	Y	Y	2	0	0	5
M	M																			
1	2																			
D	D																			
3	0																			
Y	Y	Y	Y																	
2	0	0	5																	
Purpose of Disbursement: Legal Retainer			Category/ Type																	
Activity or Event Identifier: Administrative			Transaction ID: D7699H4																	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

C. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 50 E St Se			Allocated Activity or Event Year-To-Date 27386.39																	
City State Zip Code Washington DC 20003-2620			Date <table style="display: inline-table; border: 1px solid black;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table style="display: inline-table; border: 1px solid black;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>8</td></tr></table> / <table style="display: inline-table; border: 1px solid black;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>		M	M	0	9	D	D	2	8	Y	Y	Y	Y	2	0	0	5
M	M																			
0	9																			
D	D																			
2	8																			
Y	Y	Y	Y																	
2	0	0	5																	
Purpose of Disbursement: Legal Retainer			Category/ Type																	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7735H4																	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C.</p> <p>Mailing Address 50 E St Se</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Washington</td> <td style="width:33%;">State DC</td> <td style="width:33%;">Zip Code 20003-2620</td> </tr> </table> <p>Purpose of Disbursement: Legal Retainer</p> <p>Activity or Event Identifier: Administrative [MEMO ITEM]</p>	City Washington	State DC	Zip Code 20003-2620	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5</p> <p>Transaction ID: D7773H4</p>
City Washington	State DC	Zip Code 20003-2620		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

<p>B. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C.</p> <p>Mailing Address 50 E St Se</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Washington</td> <td style="width:33%;">State DC</td> <td style="width:33%;">Zip Code 20003-2620</td> </tr> </table> <p>Purpose of Disbursement: Legal Retainer</p> <p>Activity or Event Identifier: Administrative</p>	City Washington	State DC	Zip Code 20003-2620	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5</p> <p>Transaction ID: D7652H4</p>
City Washington	State DC	Zip Code 20003-2620		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

<p>C. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 76 Fort Eddy Plaza</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Concord</td> <td style="width:33%;">State NH</td> <td style="width:33%;">Zip Code 03301</td> </tr> </table> <p>Purpose of Disbursement: Office Supplies</p> <p>Activity or Event Identifier: Administrative</p>	City Concord	State NH	Zip Code 03301	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5</p> <p>Transaction ID: D7627H4</p>
City Concord	State NH	Zip Code 03301		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.36		13.39		15.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.36		353.39		415.75

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 76 Fort Eddy Plaza			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: D7670H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.84		33.14		38.98

B. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 76 Fort Eddy Plaza			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301	Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: D7765H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.11		131.02		154.13

C. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 76 Fort Eddy Plaza			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: D7731H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.09		170.55		200.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.84		33.14		38.98

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) The Common Man			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 581			Allocated Activity or Event Year-To-Date 27386.39	
City Ashland	State NH	Zip Code 03217		
Purpose of Disbursement: Catering for Event			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y 09 / 15 / 2005 Transaction ID: D7721H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
111.05		629.30		740.35

B. Full Name (Last, First, Middle Initial) Town of Bridgewater			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 297 Mayhew Tnk			Allocated Activity or Event Year-To-Date 27386.39	
City Bridgewater	State NH	Zip Code 03301		
Purpose of Disbursement: Voter List			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y 10 / 07 / 2005 Transaction ID: D7744H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

C. Full Name (Last, First, Middle Initial) Town of Danbury			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 23 High Street			Allocated Activity or Event Year-To-Date 27386.39	
City Danbury	State NH	Zip Code 03230		
Purpose of Disbursement: Voter List			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y 09 / 28 / 2005 Transaction ID: D7737H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.75		4.25		5.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Town of Errol			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 100			Allocated Activity or Event Year-To-Date 27386.39	
City Errol	State NH	Zip Code 03579	Category/ Type	
Purpose of Disbursement: Voter List			Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7747H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.50		30.00

B. Full Name (Last, First, Middle Initial) Town of Holderness			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 203			Allocated Activity or Event Year-To-Date 27386.39	
City Holderness	State NH	Zip Code 03245	Category/ Type	
Purpose of Disbursement: Voter List			Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7748H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

C. Full Name (Last, First, Middle Initial) Town of Jefferson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Town Hall			Allocated Activity or Event Year-To-Date 27386.39	
City Jefferson	State NH	Zip Code 03583	Category/ Type	
Purpose of Disbursement: Voter List			Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7749H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Town of Northumberland

Mailing Address
Town Hall

City State Zip Code
Groveton NH 03582

Purpose of Disbursement:
Voter List

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 10 / 07 / 2005
Transaction ID: D7750H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.75 + 21.25 = 25.00

B. Full Name (Last, First, Middle Initial)
Town of Rollinsford

Mailing Address
PO Box 309

City State Zip Code
Rollinsford NH 03869-0309

Purpose of Disbursement:
Voter List

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 10 / 07 / 2005
Transaction ID: D7751H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.75 + 21.25 = 25.00

C. Full Name (Last, First, Middle Initial)
Town of Sugar Hill

Mailing Address
PO Box 574

City State Zip Code
Landaff NH 03585

Purpose of Disbursement:
Voter List

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 10 / 07 / 2005
Transaction ID: D7745H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
1.50 + 8.50 = 10.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Town of Winchester</p> <p>Mailing Address Town Hall</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Winchester</td> <td style="width:33%;">State NH</td> <td style="width:33%;">Zip Code 03470</td> </tr> </table> <p>Purpose of Disbursement: Voter List</p> <p>Activity or Event Identifier: Administrative [MEMO ITEM]</p>	City Winchester	State NH	Zip Code 03470	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2005"/></p> <p>Transaction ID: D7746H4</p>
City Winchester	State NH	Zip Code 03470		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.75"/>		<input type="text" value="21.25"/>		<input type="text" value="25.00"/>

<p>B. Full Name (Last, First, Middle Initial) Treasurer - State of New Hampshire</p> <p>Mailing Address 71 South Fruit Street Lucy G. Harrison, Admin. Sec.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Concord</td> <td style="width:33%;">State NH</td> <td style="width:33%;">Zip Code 03301-4951</td> </tr> </table> <p>Purpose of Disbursement: Court Transcripts</p> <p>Activity or Event Identifier: Administrative</p>	City Concord	State NH	Zip Code 03301-4951	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/></p> <p>Transaction ID: D7663H4</p>
City Concord	State NH	Zip Code 03301-4951		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="216.56"/>		<input type="text" value="1227.19"/>		<input type="text" value="1443.75"/>

<p>C. Full Name (Last, First, Middle Initial) U.S. Postmaster</p> <p>Mailing Address 955 Goffs Falls Rd</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Manchester</td> <td style="width:33%;">State NH</td> <td style="width:33%;">Zip Code 03101</td> </tr> </table> <p>Purpose of Disbursement: Bulk Postage Permit Renewal</p> <p>Activity or Event Identifier: Administrative [MEMO ITEM]</p>	City Manchester	State NH	Zip Code 03101	<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 27386.39</p> <p>Date <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2005"/></p> <p>Transaction ID: D7742H4</p>
City Manchester	State NH	Zip Code 03101		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="22.50"/>		<input type="text" value="127.50"/>		<input type="text" value="150.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="216.56"/>		<input type="text" value="1227.19"/>		<input type="text" value="1443.75"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																																
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39																																
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y																				
M	M	/	D	D	/	Y	Y	Y	Y																										
Manchester	NH	03101	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	8	/	2	0	0	5										
M	M	/	D	D	/	Y	Y	Y	Y																										
0	9	/	0	8	/	2	0	0	5																										
Purpose of Disbursement: Postage			Transaction ID: D7714H4																																
Activity or Event Identifier: Administrative [MEMO ITEM]																																			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.00		2550.00		3000.00

B. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																																
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39																																
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y																				
M	M	/	D	D	/	Y	Y	Y	Y																										
Manchester	NH	03101	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	5										
M	M	/	D	D	/	Y	Y	Y	Y																										
1	1	/	0	2	/	2	0	0	5																										
Purpose of Disbursement: Postage			Transaction ID: D7778H4																																
Activity or Event Identifier: Administrative [MEMO ITEM]																																			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		595.00		700.00

C. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																																
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39																																
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y																				
M	M	/	D	D	/	Y	Y	Y	Y																										
Manchester	NH	03101	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	0	5										
M	M	/	D	D	/	Y	Y	Y	Y																										
1	1	/	1	0	/	2	0	0	5																										
Purpose of Disbursement: Postage			Transaction ID: D7628H4																																
Activity or Event Identifier: Administrative																																			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.86		441.24		519.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.86		441.24		519.10

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Union Leader			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 100 William Loeb Dr PO Box 9555			Allocated Activity or Event Year-To-Date 27386.39		
City Manchester	State NH	Zip Code 03109-5309	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Printing of Newsletter			Transaction ID: D7718H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.00		765.00		900.00

B. Full Name (Last, First, Middle Initial) United Business Machines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8025 S Willow St			Allocated Activity or Event Year-To-Date 27386.39		
City Manchester	State NH	Zip Code 03103-2311	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Maintenance Fee for Photocopier			Transaction ID: D7715H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.41		308.37		362.78

C. Full Name (Last, First, Middle Initial) United Business Machines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8025 S Willow St			Allocated Activity or Event Year-To-Date 27386.39		
City Manchester	State NH	Zip Code 03103-2311	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Maintenance Fee for Photocopier			Transaction ID: D7690H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.75		276.25		325.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.75		276.25		325.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15123			Allocated Activity or Event Year-To-Date 27386.39	
City Albany	State NY	Zip Code 12212-5123	Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5 Transaction ID: D7769H4	
Purpose of Disbursement: Telephone				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.19		137.11		161.30

B. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15123			Allocated Activity or Event Year-To-Date 27386.39	
City Albany	State NY	Zip Code 12212-5123	Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5 Transaction ID: D7692H4	
Purpose of Disbursement: Telephone				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.14		556.16		654.30

C. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15123			Allocated Activity or Event Year-To-Date 27386.39	
City Albany	State NY	Zip Code 12212-5123	Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5 Transaction ID: D7693H4	
Purpose of Disbursement: Telephone				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.79		214.18		251.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.93		770.34		906.27

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15123			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">27386.39</div>		
City Albany	State NY	Zip Code 12212-5123	Date M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 5 Transaction ID: D7640H4		
Purpose of Disbursement: Telephone		Category/ Type			
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.01		561.09		660.10

B. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15123			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">27386.39</div>		
City Albany	State NY	Zip Code 12212-5123	Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5 Transaction ID: D7768H4		
Purpose of Disbursement: Telephone		Category/ Type			
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.53		547.06		643.59

C. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15123			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">27386.39</div>		
City Albany	State NY	Zip Code 12212-5123	Date M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 5 Transaction ID: D7726H4		
Purpose of Disbursement: Telephone		Category/ Type			
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.03		549.84		646.87

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.01		561.09		660.10

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Verizon
Mailing Address
PO Box 15123
City State Zip Code
Albany NY 12212-5123
Purpose of Disbursement:
Telephone
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 09 / 22 / 2005
Transaction ID: D7734H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.88		84.34		99.22

B. Full Name (Last, First, Middle Initial)
Verizon
Mailing Address
PO Box 15123
City State Zip Code
Albany NY 12212-5123
Purpose of Disbursement:
Telephone
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 11 / 16 / 2005
Transaction ID: D7641H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.45		121.57		143.02

C. Full Name (Last, First, Middle Initial)
VoiceText.com
Mailing Address
211 E 7th St
City State Zip Code
Austin TX 78701-3334
Purpose of Disbursement:
Conference Calling
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 10 / 19 / 2005
Transaction ID: D7764H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.64		26.32		30.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.45		121.57		143.02

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7710H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.47		87.67		103.14

B. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7678H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.33		188.88		222.21

C. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7659H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.24		126.08		148.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.57		314.96		370.53

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 5 Transaction ID: D7639H4	
Austin	TX	78701-3334		
Purpose of Disbursement: Conference Calling			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.39		58.91		69.30

B. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5 Transaction ID: D7631H4	
Austin	TX	78701-3334		
Purpose of Disbursement: Conference Calling			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.59		3.37		3.96

C. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: D7758H4	
Austin	TX	78701-3334		
Purpose of Disbursement: Conference Calling			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.44		2.53		2.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.98		62.28		73.26

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7741H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="8.54"/>		<input type="text" value="48.43"/>		<input type="text" value="56.97"/>

B. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7722H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4.98"/>		<input type="text" value="28.24"/>		<input type="text" value="33.22"/>

C. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7716H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.10"/>		<input type="text" value="6.28"/>		<input type="text" value="7.38"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) VoiceText.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 E 7th St			Allocated Activity or Event Year-To-Date 27386.39		
City Austin	State TX	Zip Code 78701-3334	Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Conference Calling			Transaction ID: D7709H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.72		43.76		51.48

B. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Northfield	State NH	Zip Code 03276	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement: Travel			Transaction ID: D7658H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.85		424.15		499.00

C. Full Name (Last, First, Middle Initial) Southwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 36647			Allocated Activity or Event Year-To-Date 27386.39		
City Dallas	State TX	Zip Code 75235	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Airfare			Transaction ID: D7806H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.95		84.75		99.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.85		424.15		499.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Southwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 36647			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">27386.39</div>	
City State Zip Code Dallas TX 75235			Date <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">M</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">M</table> / <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">D</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">D</table> / <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> 12 / 07 / 2005 Transaction ID: D7807H4	
Purpose of Disbursement: Airfare		Category/ Type		
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">17.53</div>		<div style="border: 1px solid black; padding: 2px;">99.37</div>		<div style="border: 1px solid black; padding: 2px;">116.90</div>

B. Full Name (Last, First, Middle Initial) Travelocity			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3150 Sabre Drive			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">27386.39</div>	
City State Zip Code Southlake TX 76092			Date <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">M</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">M</table> / <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">D</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">D</table> / <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> 12 / 07 / 2005 Transaction ID: D7810H4	
Purpose of Disbursement: Airfare		Category/ Type		
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">42.36</div>		<div style="border: 1px solid black; padding: 2px;">240.04</div>		<div style="border: 1px solid black; padding: 2px;">282.40</div>

C. Full Name (Last, First, Middle Initial) Rick Boylan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 Isle Drive St.			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">27386.39</div>	
City State Zip Code St. Pete Beach FL 33706			Date <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">M</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">M</table> / <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">D</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">D</table> / <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> <table style="display: inline-table; border: 1px solid black; text-align: center; width: 20px;">Y</table> 12 / 07 / 2005 Transaction ID: D7662H4	
Purpose of Disbursement: Reimbursement: Travel		Category/ Type		
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">26.76</div>		<div style="border: 1px solid black; padding: 2px;">151.64</div>		<div style="border: 1px solid black; padding: 2px;">178.40</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">26.76</div>		<div style="border: 1px solid black; padding: 2px;">151.64</div>		<div style="border: 1px solid black; padding: 2px;">178.40</div>

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

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

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) US Airways			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1501			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">27386.39</div>	
City Winston Salem	State NC	Zip Code 27102	Date M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5 Transaction ID: D7830H4	
Purpose of Disbursement: Airfare				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.76		151.64		178.40

B. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">27386.39</div>	
City Northfield	State NH	Zip Code 03276	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5 Transaction ID: D7671H4	
Purpose of Disbursement: Reimbursement				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.00		79.37		93.37

C. Full Name (Last, First, Middle Initial) Amtrak			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Massachusetts Avenue, NE			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">27386.39</div>	
City Washington	State DC	Zip Code 20002	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5 Transaction ID: D7811H4	
Purpose of Disbursement: Train Ticket				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80		10.20		12.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.00		79.37		93.37

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Flowers By Leslie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 767 Islington Street			Allocated Activity or Event Year-To-Date 27386.39	
City Portsmouth	State NH	Zip Code 03801		
Purpose of Disbursement: Funeral Flowers			Date MM / DD / YYYY 12 / 15 / 2005	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7812H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.25		46.75		55.00

B. Full Name (Last, First, Middle Initial) Uno's Chicago Bar & Grill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Union Station 50 Massachusetts Ave.			Allocated Activity or Event Year-To-Date 27386.39	
City Washington	State DC	Zip Code 20002		
Purpose of Disbursement: Business Lunch			Date MM / DD / YYYY 12 / 15 / 2005	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7813H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.95		22.42		26.37

C. Full Name (Last, First, Middle Initial) Jennifer L. Kuzma			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 N State St			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301-5058		
Purpose of Disbursement: Reimbursement			Date MM / DD / YYYY 12 / 15 / 2005	
Activity or Event Identifier: Administrative			Transaction ID: D7672H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.24		29.72		34.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.24		29.72		34.96

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Amtrak Mailing Address 60 Massachusetts Avenue, NE City State Zip Code Washington DC 20002 Purpose of Disbursement: Train Ticket Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 27386.39 Date MM / DD / YYYY 12 / 15 / 2005 Transaction ID: D7818H4
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80		10.20		12.00

B. Full Name (Last, First, Middle Initial) Great Wraps Mailing Address Union Station 50 Massachusetts Ave, NE City State Zip Code Washington DC 20002 Purpose of Disbursement: Food for Trip Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 27386.39 Date MM / DD / YYYY 12 / 15 / 2005 Transaction ID: D7819H4
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.19		6.77		7.96

C. Full Name (Last, First, Middle Initial) Manchester Airport-Parking Mailing Address 1 Airport Road City State Zip Code Manchester NH 03103 Purpose of Disbursement: Parking Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 27386.39 Date MM / DD / YYYY 12 / 15 / 2005 Transaction ID: D7820H4
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.25		12.75		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Jennifer L. Kuzma			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 126 N State St			Allocated Activity or Event Year-To-Date 27386.39		
City	State	Zip Code	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Concord	NH	03301-5058			
Purpose of Disbursement: Reimbursement			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: D7673H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.07		164.73		193.80

B. Full Name (Last, First, Middle Initial) Southwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 36647			Allocated Activity or Event Year-To-Date 27386.39		
City	State	Zip Code	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Dallas	TX	75235			
Purpose of Disbursement: Airfare			Category/ Type		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7817H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.07		164.73		193.80

C. Full Name (Last, First, Middle Initial) Nick M Clemons			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 290 Pleasant St			Allocated Activity or Event Year-To-Date 27386.39		
City	State	Zip Code	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Portsmouth	NH	03801-4234			
Purpose of Disbursement: Reimbursement: Travel			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: D7675H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.92		282.93		332.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.99		447.66		526.65

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Colin Van Ostern
Mailing Address
Washington Street Community St
City State Zip Code
Concord NH 03301-4322
Purpose of Disbursement:
Reimbursement: Travel
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 12 / 20 / 2005
Transaction ID: D7687H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.10		363.27		427.37

B. Full Name (Last, First, Middle Initial)
Hyatt Regency
Mailing Address
400 New Jersey Ave, NW
City State Zip Code
Washington DC 20001
Purpose of Disbursement:
Hotel Room
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 12 / 20 / 2005
Transaction ID: D7925H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.97		175.50		206.47

C. Full Name (Last, First, Middle Initial)
Southwest Airlines
Mailing Address
PO Box 36647
City State Zip Code
Dallas TX 75235
Purpose of Disbursement:
Airfare
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
27386.39
Date 12 / 20 / 2005
Transaction ID: D7926H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.13		187.77		220.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.10		363.27		427.37

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Jennifer L. Kuzma			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 126 N State St			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301-5058	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement			Transaction ID: D7695H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.20		125.80		148.00

B. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Manchester	State NH	Zip Code 03101	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Stamps			Transaction ID: D7816H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.20		125.80		148.00

C. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Northfield	State NH	Zip Code 03276	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement			Transaction ID: D7717H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.63		71.62		84.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.20		125.80		148.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Brigham & Women's Hospital Gift Shop

Mailing Address
75 Francis Street

City	State	Zip Code
Boston	MA	02115

Purpose of Disbursement:
Get Well Flowers

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
27386.39

Date / /
Transaction ID: D7805H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.08		40.17		47.25

B. Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address
955 Goffs Falls Rd

City	State	Zip Code
Manchester	NH	03101

Purpose of Disbursement:
Roll of Stamps

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
27386.39

Date / /
Transaction ID: D7804H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.55		31.45		37.00

C. Full Name (Last, First, Middle Initial)
Abbe Ross

Mailing Address
10 Dearborn Rd

City	State	Zip Code
Northfield	NH	03276

Purpose of Disbursement:
Reimbursement

Activity or Event Identifier:
Administrative
[MEMO ITEM]

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

Allocated Activity or Event Year-To-Date
27386.39

Date / /
Transaction ID: D7719H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.77		100.70		118.47

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Sam's Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 304 Sheep Davis Road			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Janitorial Supplies			Transaction ID: D7802H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.34		52.99		62.33

B. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Manchester	State NH	Zip Code 03101	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Roll of Stamps			Transaction ID: D7801H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.55		31.45		37.00

C. Full Name (Last, First, Middle Initial) Wal-Mart			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 344 Loudon Road			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: TV Cords & Supplies			Transaction ID: D7803H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.87		16.27		19.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Northfield	State NH	Zip Code 03276	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement			Transaction ID: D7730H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.41"/>		<input type="text" value="8.04"/>		<input type="text" value="9.45"/>

B. Full Name (Last, First, Middle Initial) Borders Bookstore			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 76 Fort Eddy Road			Allocated Activity or Event Year-To-Date 27386.39		
City Concord	State NH	Zip Code 03301	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Sympathy Cards			Transaction ID: D7791H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.41"/>		<input type="text" value="8.04"/>		<input type="text" value="9.45"/>

C. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Northfield	State NH	Zip Code 03276	Date <input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement			Transaction ID: D7739H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="21.54"/>		<input type="text" value="122.07"/>		<input type="text" value="143.61"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Fortin-Gage Florist, INC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 86 W. Pearl Street			Allocated Activity or Event Year-To-Date 27386.39	
City Nashua	State NH	Zip Code 03060	Date M M / D D / Y Y Y Y 09 / 28 / 2005 Transaction ID: D7788H4	
Purpose of Disbursement: Funeral Flower Arrangement				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

B. Full Name (Last, First, Middle Initial) Hannaford Food & Drug			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 73 Fort Eddy Road			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301	Date M M / D D / Y Y Y Y 09 / 28 / 2005 Transaction ID: D7790H4	
Purpose of Disbursement: Food for Meeting				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.49		48.12		56.61

C. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39	
City Manchester	State NH	Zip Code 03101	Date M M / D D / Y Y Y Y 09 / 28 / 2005 Transaction ID: D7789H4	
Purpose of Disbursement: Roll of Stamps				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.55		31.45		37.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Northfield	State NH	Zip Code 03276	Date <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement			Transaction ID: D7740H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.66		37.79		44.45

B. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39		
City Manchester	State NH	Zip Code 03101	Date <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Roll of Stamps & Shipping for Package			Transaction ID: D7787H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.66		37.79		44.45

C. Full Name (Last, First, Middle Initial) Rick Boylan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 205 Isle Drive St.			Allocated Activity or Event Year-To-Date 27386.39		
City St. Pete Beach	State FL	Zip Code 33706	Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement: Travel			Transaction ID: D7757H4		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.51		286.26		336.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Central Parking System			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 555 11th Street, NW			Allocated Activity or Event Year-To-Date 27386.39	
City Washington	State DC	Zip Code 20004	Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2005"/> Transaction ID: D7824H4	
Purpose of Disbursement: Parking				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.25		12.75		15.00

B. Full Name (Last, First, Middle Initial) Dollar Rent-A-Car			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4720 Spruce Street			Allocated Activity or Event Year-To-Date 27386.39	
City Tampa	State FL	Zip Code 33607	Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2005"/> Transaction ID: D7825H4	
Purpose of Disbursement: Rental Car				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.76		43.98		51.74

C. Full Name (Last, First, Middle Initial) Matsutake			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13363 Scotsmore Way			Allocated Activity or Event Year-To-Date 27386.39	
City Herndon	State VA	Zip Code 20171	Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2005"/> Transaction ID: D7828H4	
Purpose of Disbursement: Meal				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.56		14.56		17.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Pronto Press			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1353 Connecticut Ave, NW			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: D7829H4	
Washington	DC	20036		
Purpose of Disbursement: Photocopies			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.52		8.66		10.18

B. Full Name (Last, First, Middle Initial) Rosslyn Chevron			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1830 N. Fort Myer			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: D7826H4	
Arlington	VA	22209		
Purpose of Disbursement: Gasoline			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.91		5.17		6.08

C. Full Name (Last, First, Middle Initial) Tampa Airport			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5503 W. Spruce Street			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: D7823H4	
Tampa	FL	33607		
Purpose of Disbursement: Parking			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.93		22.32		26.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Twigs Restaurant & Grill Mailing Address Capital Hilton 16 & K Street City State Zip Code Washington DC 20036 Purpose of Disbursement: Meal Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 27386.39 Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D7827H4	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	9	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	9	/	2	0	0	5												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 1.80		_____ 10.20		_____ 12.00

B. Full Name (Last, First, Middle Initial) US Airways Mailing Address PO Box 1501 City State Zip Code Winston Salem NC 27102 Purpose of Disbursement: Airfare Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 27386.39 Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D7822H4	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	9	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	9	/	2	0	0	5												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 29.76		_____ 168.64		_____ 198.40

C. Full Name (Last, First, Middle Initial) Abbe Ross Mailing Address 10 Dearborn Rd City State Zip Code Northfield NH 03276 Purpose of Disbursement: Reimbursement Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 27386.39 Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D7776H4	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	3	1	/	2	0	0	5												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 16.80		_____ 95.20		_____ 112.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 0.00		_____ 0.00		_____ 0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
_____		_____		_____

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Borders Bookstore			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 76 Fort Eddy Road			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301	Category/ Type	
Purpose of Disbursement: Photo Supplies				
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: D7797H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.74		4.21		4.95

B. Full Name (Last, First, Middle Initial) Kinko's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 Fort Eddy Rd			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301-7404	Category/ Type	
Purpose of Disbursement: Printing				
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: D7799H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.11		29.01		34.12

C. Full Name (Last, First, Middle Initial) Matthew's Hallmark			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 56 Fort Eddy Road			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301	Category/ Type	
Purpose of Disbursement: Paper Supplies				
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: D7798H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.49		8.47		9.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Music Factory, Inc <hr/> Mailing Address 114 Londonderry Turnpike <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">City</td> <td style="width:33%; border: none;">State</td> <td style="width:33%; border: none;">Zip Code</td> <td style="width:10%; border: none;"></td> </tr> <tr> <td style="border: none;">Hooksett</td> <td style="border: none;">NH</td> <td style="border: none;">03106</td> <td style="border: none;"><input type="text"/></td> </tr> </table> <hr/> Purpose of Disbursement: Sound Equipment Rental <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div> <hr/> Activity or Event Identifier: Administrative [MEMO ITEM]	City	State	Zip Code		Hooksett	NH	03106	<input type="text"/>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">27386.39</div> <hr/> Date <table style="font-size: small; border: none;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: D7800H4	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	5
City	State	Zip Code																											
Hooksett	NH	03106	<input type="text"/>																										
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0	/	3	1	/	2	0	0	5																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		17.00		20.00

B. Full Name (Last, First, Middle Initial) Rocky's ACE Hardware <hr/> Mailing Address 20 Loudon Rd <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">City</td> <td style="width:33%; border: none;">State</td> <td style="width:33%; border: none;">Zip Code</td> <td style="width:10%; border: none;"></td> </tr> <tr> <td style="border: none;">Concord</td> <td style="border: none;">NH</td> <td style="border: none;">03301-5603</td> <td style="border: none;"><input type="text"/></td> </tr> </table> <hr/> Purpose of Disbursement: Keys for Office <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div> <hr/> Activity or Event Identifier: Administrative [MEMO ITEM]	City	State	Zip Code		Concord	NH	03301-5603	<input type="text"/>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">27386.39</div> <hr/> Date <table style="font-size: small; border: none;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: D7796H4	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	5
City	State	Zip Code																											
Concord	NH	03301-5603	<input type="text"/>																										
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0	/	3	1	/	2	0	0	5																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.89		5.08		5.97

C. Full Name (Last, First, Middle Initial) U.S. Postmaster <hr/> Mailing Address 955 Goffs Falls Rd <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">City</td> <td style="width:33%; border: none;">State</td> <td style="width:33%; border: none;">Zip Code</td> <td style="width:10%; border: none;"></td> </tr> <tr> <td style="border: none;">Manchester</td> <td style="border: none;">NH</td> <td style="border: none;">03101</td> <td style="border: none;"><input type="text"/></td> </tr> </table> <hr/> Purpose of Disbursement: Roll of Stamps <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div> <hr/> Activity or Event Identifier: Administrative [MEMO ITEM]	City	State	Zip Code		Manchester	NH	03101	<input type="text"/>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">27386.39</div> <hr/> Date <table style="font-size: small; border: none;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: D7795H4	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	5
City	State	Zip Code																											
Manchester	NH	03101	<input type="text"/>																										
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0	/	3	1	/	2	0	0	5																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.55		31.45		37.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Abbe Ross			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 10 Dearborn Rd			Allocated Activity or Event Year-To-Date 27386.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D7784H4			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	0	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	1	0	/	2	0	0	5																
Northfield	NH	03276																							
Purpose of Disbursement: Reimbursement			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.22		613.30		721.52

B. Full Name (Last, First, Middle Initial) Network Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 13200 Woodland Park Drive			Allocated Activity or Event Year-To-Date 27386.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D7794H4			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	0	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	1	0	/	2	0	0	5																
Herndon	VA	20171																							
Purpose of Disbursement: Internet Domain Registration			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.44		53.53		62.97

C. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 955 Goffs Falls Rd			Allocated Activity or Event Year-To-Date 27386.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D7792H4			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	0	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	1	0	/	2	0	0	5																
Manchester	NH	03101																							
Purpose of Disbursement: Stamps & Shipping			Category/ Type																						
Activity or Event Identifier: Administrative [MEMO ITEM]																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.78		559.77		658.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Brian Dumez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 720 State St. #4			Allocated Activity or Event Year-To-Date 27386.39	
City Portsmouth	State NH	Zip Code 03801	Date M M / D D / Y Y Y Y 08 / 10 / 2005 Transaction ID: D7785H4	
Purpose of Disbursement: Reimbursement				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.50		30.00

B. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 76 Fort Eddy Plaza			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301	Date M M / D D / Y Y Y Y 08 / 10 / 2005 Transaction ID: D7815H4	
Purpose of Disbursement: Computer Supplies				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.50		30.00

C. Full Name (Last, First, Middle Initial) Kathleen List			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 15 Warren Street			Allocated Activity or Event Year-To-Date 27386.39	
City Concord	State NH	Zip Code 03301	Date M M / D D / Y Y Y Y 09 / 28 / 2005 Transaction ID: D7865H4	
Purpose of Disbursement: Reimbursement				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.74		21.25		24.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Best Buy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 78 Damante Drive			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Concord	NH	03301		
Purpose of Disbursement: Video Tapes			Date M M / D D / Y Y Y Y 09 / 28 / 2005	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7833H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.74		21.25		24.99

B. Full Name (Last, First, Middle Initial) Kathleen List			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 15 Warren Street			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Concord	NH	03301		
Purpose of Disbursement: Reimbursement			Date M M / D D / Y Y Y Y 10 / 19 / 2005	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7893H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.53		42.72		50.25

C. Full Name (Last, First, Middle Initial) National Recording Supplies, INC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 764 5th Avenue			Allocated Activity or Event Year-To-Date 27386.39	
City	State	Zip Code	Category/ Type	
Brooklyn	NY	11232		
Purpose of Disbursement: Video Tapes			Date M M / D D / Y Y Y Y 10 / 19 / 2005	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D7832H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.53		42.72		50.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
3856.43	21854.20	25710.63

Image# 26950063680

Form/Schedule: **SB29** #NULL#
Transaction ID: **D7983**

Form/Schedule: **SB29** See Schedule H4 for Itemization of
Transaction ID: **D7982**
