

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Tisei for Congress

ADDRESS (number and street) 26 Main Street  
 Check if different than previously reported. (ACC) Lynnfield MA 01880

2. **FEC IDENTIFICATION NUMBER** ▼ C C00506170 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
MA 06

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of MA  
11 06 2012

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
10 18 2012 11 26 2012

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 Brian M. Cresta  
Signature of Treasurer Brian M. Cresta *[Electronically Filed]* Date M M / D D / Y Y Y Y  
12 31 2012

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  
**Tisei for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="294904.39"/>	<input type="text" value="2294885.69"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="3100.00"/>	<input type="text" value="17968.23"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="291804.39"/>	<input type="text" value="2276917.46"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="634840.99"/>	<input type="text" value="2256399.57"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="6362.66"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="634840.99"/>	<input type="text" value="2250036.91"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="2648.03"/>	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

**For further information contact:**

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

This amendment is to update itemized contributions for donor information of earmarked contributions previously listed as unitemized.

Form/Schedule:  
Transaction ID:

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Tisei for Congress

Report Covering the Period: From: 10 / 18 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2012 (date of general election)	COLUMN C Total for 11 / 07 / 2012 (date after general election)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
173690.00	1680886.41	50.00
(ii) Unitemized		
33863.39	273873.28	20.00
(iii) Total of contributions from individuals		
207553.39	1954759.69	70.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
87351.00	340126.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 228

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
294904.39	2294885.69	70.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
5000.00	35227.50	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	6362.66	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
299904.39	2336475.85	70.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 228

Write or Type Committee Name

Tisei for Congress

Report Covering the Period: From:  /  /  To:  /  /

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
634840.99	2256399.57	42930.02
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
2100.00	16968.23	1600.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 7 / 228

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

1000.00	1000.00	0.00
---------	---------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

3100.00	17968.23	1600.00
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21. OTHER DISBURSEMENTS

0.00	15000.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

637940.99	2289367.80	44530.02
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

291804.39	2276917.46	-1530.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

634840.99	2250036.91	42930.02
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	340684.63
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	299904.39
25. SUBTOTAL (add Line 23 and Line 24).....	640589.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	637940.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2648.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SAID ABUZHARA**

Mailing Address **29 MACKENZIE LANE**

City **WAKEFIELD** State **MA** Zip Code **01880-3528**

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

Name of Employer **SELF** Occupation **REAL ESTATE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12839**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**DR. JOHN H. ACRES**

Mailing Address **185 FULTON STREET  
APT 404**

City **BOSTON** State **MA** Zip Code **02109-1389**

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

Name of Employer **RETIRED** Occupation **UNIVERSITY ADMINISTRATOR (EMERITUS)**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**478.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12770**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**JOHN ADAM**

Mailing Address **95 RIVERVIEW RD**

City **GLOUCESTER** State **MA** Zip Code **01930-1671**

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

Name of Employer **BANK OF AMERICA** Occupation **BANKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11.12179**

Amount of Each Receipt this Period  
**2000.00**

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

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

**2300.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN C. ADDONIZIO**

Mailing Address **38 BROOKS ST**

City **WINCHESTER** State **MA** Zip Code **01890-3865**

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

Name of Employer **EXAMWORKS** Occupation **SALES**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12597**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER P. AGGANIS**

Mailing Address **P.O. BOX 8**

City **READING** State **MA** Zip Code **01867-0008**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12606**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**KARA M. AHERN**

Mailing Address **820 S. COLUMBUS STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314-4289**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12227**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3250.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL B. AHERN**

Mailing Address 135 COUNTRY CLUB RD

City MELROSE State MA Zip Code 02176-2903

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **875.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2012**

**Transaction ID : SA11.12707**

Amount of Each Receipt this Period  
**125.00**

**B.** Full Name (Last, First, Middle Initial)  
**NANCY S. ANTHONY**

Mailing Address 103 OLD COLONY ROAD

City WELLESLEY State MA Zip Code 02481

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

Name of Employer FERNWOOD ADVISORS Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12696**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL A. ARGIOS**

Mailing Address

City UNKNOWN State ZZ Zip Code 00000

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12469**

Amount of Each Receipt this Period  
**250.00**

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

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

**875.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL ARMITAGE**

Mailing Address 10 MEADOW DRIVE

City MIDDLETON State MA Zip Code 01949-2322

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

Name of Employer SELF EMPLOYED Occupation INVESTIGATIONS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12317**

Amount of Each Receipt this Period  
**125.00**

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

Mailing Address 299 SALEM ST

City SWAMPSCOTT State MA Zip Code 01907-1322

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12575**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**DOUG ATKINSON**

Mailing Address 15 CLOUTMAN'S LANE

City MARBLEHEAD State MA Zip Code 01945-1503

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12822**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1625.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HENRY D. AUDESSE**

Mailing Address 97 LARCH ROW

City WENHAM State MA Zip Code 01984-1621

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.12844**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. NANCY ACHIN AUDESSE**

Mailing Address 97 LARCH ROW

City WENHAM State MA Zip Code 01984-1621

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012

**Transaction ID : SA11.12715**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN AVALLON**

Mailing Address 7 OBER STREET

City BEVERLY State MA Zip Code 01915

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

Name of Employer HABAMA, INC. Occupation MANAGING DIRECTOR CAP GEMINI HEAD C

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11.12081**

Amount of Each Receipt this Period  
2500.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LAUREN S. BAKER**

Mailing Address **49 MONUMENT AVE**

City **SWAMPSCOTT** State **MA** Zip Code **01907-1947**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12479**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **31 WILDEWOOD DRIVE**

City **LYNNFIELD** State **MA** Zip Code **01940-1343**

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

Name of Employer **BAKER & COMPANY, P.C.** Occupation **PUBLIC RELATIONS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12233**

Amount of Each Receipt this Period  
**125.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN A. BAKER**

Mailing Address **31 WILDEWOOD DRIVE**

City **LYNNFIELD** State **MA** Zip Code **01940-1343**

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

Name of Employer **BAKER & COMPANY, P.C.** Occupation **CPA**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**725.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12232**

Amount of Each Receipt this Period  
**125.00**

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

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

**2250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD BANE**

Mailing Address **277 HUMPHREY STREET**

City **SWAMPSCOTT** State **MA** Zip Code **01907-2511**

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

Name of Employer **BANE CARE MANAGEMENT LLC** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12226**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD F. BARTHELMES**

Mailing Address **28 SOUTHPOINT LANE**

City **IPSWICH** State **MA** Zip Code **01938-3032**

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

Name of Employer **LYNNFIELD ENGINEERING** Occupation **ENGINEER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12768**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**LUCILLE BATAL**

Mailing Address **834 GREAT POND RD**

City **NORTH ANDOVER** State **MA** Zip Code **01845-2027**

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

Name of Employer **SELF-EMPLOYED BALDPATE HOSPITAL GEC** Occupation **HOSPITAL CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12622**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD BEARDSLEY**

Mailing Address 18 LOW LAND FARM RD

City ESSEX State MA Zip Code 01929-1222

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

Name of Employer THE COLBENT CORPORATION Occupation FINANCIAL SERVICES

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12809**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 94 PROSPECT ST

City READING State MA Zip Code 01867-2333

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

Name of Employer RAYTHEON Occupation DEFENSE CONTRACTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12815**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**GEORGIA BELTSIOS**

Mailing Address 125 SUMMER ST  
STE 1250

City BOSTON State MA Zip Code 02110-1676

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11.12475**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAULA F. BENARD**

Mailing Address **4 DUNLAP RD**

City **BURLINGTON** State **MA** Zip Code **01803-2822**

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

Name of Employer **CN WOOD CO INC** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12845**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **12 WIRTHMORE LN.**

City **LYNNFIELD** State **MA** Zip Code **01940-1808**

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

Name of Employer **TOWN OF LYNNFIELD** Occupation **RETIRED FIRE CHIEF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : SA11.12213**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS BOGART**

Mailing Address **12 WIRTHMORE LN.**

City **LYNNFIELD** State **MA** Zip Code **01940-1808**

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

Name of Employer **TOWN OF LYNNFIELD** Occupation **RETIRED FIRE CHIEF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12573**

Amount of Each Receipt this Period  
**50.00**

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

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

**650.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEANNE M. BORAWSKI**

Mailing Address **3 DEER PATH LANE**

City **READING** State **MA** Zip Code **01867-4620**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : SA11.12216**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **164 DEAN ROAD**

City **BROOKLINE** State **MA** Zip Code **02445-4246**

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

Name of Employer **BLACKROCK** Occupation **BUSINESS MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12495**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. PAUL B. BOUDREAU**

Mailing Address **111 WINONA ST**

City **WEST PEABODY** State **MA** Zip Code **01960-4631**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12468**

Amount of Each Receipt this Period  
**250.00**

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

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

**1450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR J. BOURQUE III**

Mailing Address 116 LOCKSLEY ROAD

City LYNNFIELD State MA Zip Code 01940-1414

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

Name of Employer SURVEILLANCE SPECIALTIES Occupation VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SB11.11713**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
See third quarter 2012. Reattribution below.

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR J. BOURQUE III**

Mailing Address 116 LOCKSLEY ROAD

City LYNNFIELD State MA Zip Code 01940-1414

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

Name of Employer SURVEILLANCE SPECIALTIES Occupation VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SB11.11713.1**

Amount of Each Receipt this Period  
-1500.00

**[MEMO ITEM]**  
Reattributed below

**C.** Full Name (Last, First, Middle Initial)  
**JOAN BOURQUE**

Mailing Address 116 LOCKSLEY ROAD

City LYNNFIELD State MA Zip Code 01940-1414

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

Name of Employer SURVEILLANCE SPECIALTIES Occupation SECRETARY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SB11.11713.2**

Amount of Each Receipt this Period  
1500.00

**[MEMO ITEM]**  
Reattributed

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHANNON BRANDANO**

Mailing Address **80 ADAM STREET**

City **MALDEN** State **MA** Zip Code **02148-6413**

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

Name of Employer **BRANDANO LAW** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 20 / 2012**

**Transaction ID : SA11.12189**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **488 PLEASANT STREET**

City **NORTH ANDOVER** State **MA** Zip Code **01845-2920**

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

Name of Employer **ENDOEVOLUTION, LLC** Occupation **BUSINESS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12367**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**RYAN D. BURKE**

Mailing Address **5 SKERRY ST**

City **SALEM** State **MA** Zip Code **01970-2621**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12833**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>CHRISTOPHER BURN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 151 HOBART AVE		<b>Transaction ID : SA11.12482</b>
City SHORT HILLS	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GOSHEN INVESTMENTS, LLC	Occupation MANAGER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>JONATHAN BUSH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 15 HUBBARD PARK RD.		<b>Transaction ID : SA11.12230</b>
City CAMBRIDGE	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer ATHENAHEALTH, INC	Occupation MANAGER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>PATRICK CAHILL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 30 SAINT PAUL ST APT 6		<b>Transaction ID : SA11.12354</b>
City BROOKLINE	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer HARVARD PILGRIM HEALTH CARE	Occupation GOVERNMENT AFFAIRS	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD D. CALMAS**

Mailing Address 52 FAIRWAY RD

City CHESTNUT HILL State MA Zip Code 02467-1818

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2012

**Transaction ID : SA11.12474**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 23 HIGH STREET

City HINGHAM State MA Zip Code 02043-3191

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

Name of Employer Occupation  
GMC STRATEGIES CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11.12225**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM H. CARROLL**

Mailing Address 48 FOREST ST

City WAKEFIELD State MA Zip Code 01880-3635

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2012

**Transaction ID : SA11.12885**

Amount of Each Receipt this Period  
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES CARTER**

Mailing Address **7 FERNWAY**

City **LYNNFIELD** State **MA** Zip Code **01940-2129**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12660**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. CRAIG S. CERRETANI**

Mailing Address **116 HUNTINGTON AVE  
10TH FLOOR**

City **BOSTON** State **MA** Zip Code **02116-5749**

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

Name of Employer **LONGFELLOW BENEFITS** Occupation **SALES**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12462**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**BRANDON P. CHAPMAN**

Mailing Address **18 HIGHLAND ST**

City **READING** State **MA** Zip Code **01867-2146**

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

Name of Employer **PRESIDIO NETWORKED SOLUTIONS** Occupation **FINANCE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **460.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12344**

Amount of Each Receipt this Period  
**50.00**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRANDON P. CHAPMAN**

Mailing Address 18 HIGHLAND ST

City State Zip Code  
READING MA 01867-2146

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

Name of Employer Occupation  
PRESIDIO NETWORKED SOLUTIONS FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
460.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2012

**Transaction ID : SA11.12714**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5555 HERON POINT DRIVE

City State Zip Code  
NAPLES FL 34108-2708

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12509**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MARTHA CHAYET**

Mailing Address 26 WINTER STREET

City State Zip Code  
SALEM MA 01970-3807

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

Name of Employer Occupation  
THE OXBRIDGE GROUP EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12444**

Amount of Each Receipt this Period  
250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARTHA CHAYET**

Mailing Address **26 WINTER STREET**

City **SALEM** State **MA** Zip Code **01970-3807**

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

Name of Employer **THE OXBRIDGE GROUP** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12789**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **26 WINTER STREET**

City **SALEM** State **MA** Zip Code **01970-3807**

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12440**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**FREDERICK A. CIAMPA**

Mailing Address **10 BEAVER PLACE**

City **BILLERICA** State **MA** Zip Code **01821-3750**

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

Name of Employer **STONEHAM BANK** Occupation **C.P.A.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12377**

Amount of Each Receipt this Period  
**400.00**

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

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

**750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PETER CLAY**

Mailing Address 14 ARBOR STREET

City WENHAM State MA Zip Code 01984-1402

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : SA11.12414**

Amount of Each Receipt this Period  
**125.00**

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

Mailing Address 14 ARBOR STREET

City WENHAM State MA Zip Code 01984-1402

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12693**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**PHILIP H. COHEN**

Mailing Address 1500 OCEAN DR  
APT 903

City MIAMI BEACH State FL Zip Code 33139-3133

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12667**

Amount of Each Receipt this Period  
**500.00**

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

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

**675.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NEIL N. COLICCHIO**

Mailing Address 169 CROSSWINDS DRIVE

City	State	Zip Code
GROTON	MA	01450-1135

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

Name of Employer SELF	Occupation ATTORNEY
--------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12697**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**NEIL N. COLICCHIO**

Mailing Address 169 CROSSWINDS DRIVE

City	State	Zip Code
GROTON	MA	01450-1135

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

Name of Employer SELF	Occupation ATTORNEY
--------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : SA11.12836**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**ARIEH COLL**

Mailing Address 103 STANTON AVE

City	State	Zip Code
AUBURNDALE	MA	02466-3005

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

Name of Employer SELF	Occupation ADVISOR
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12494**

Amount of Each Receipt this Period  
1000.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTOPHER W. COLLINS**

Mailing Address **72 HARBOR STREET**

City **MANCHESTER** State **MA** Zip Code **01944-1425**

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

Name of Employer **FIRST ATLANTIC CAPITAL** Occupation **MANAGING PARTNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12349**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**LISA M. COLLINS**

Mailing Address **72 HARBOR STREET**

City **MANCHESTER** State **MA** Zip Code **01944-1425**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12350**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE C. COMBIS**

Mailing Address **2310 N BREVARD STREET**

City **CHARLOTTE** State **NC** Zip Code **28206-3475**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12400**

Amount of Each Receipt this Period  
**1000.00**

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

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

**6000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LOUISE V. CONDON**

Mailing Address **15 TAMARACK LANE**

City **NEEDHAM** State **MA** Zip Code **02492-2030**

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

Name of Employer **SELF** Occupation **REAL ESTATE BROKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12403**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**KATHLEEN BENNETT CONNORS**

Mailing Address **133 PLEASANT ST**

City **WOBURN** State **MA** Zip Code **01801-4154**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12365**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN M. CONSIDINE**

Mailing Address **26 STAR OF THE SEA DRIVE**

City **DARTMOUTH** State **MA** Zip Code **02748-1272**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2012**

**Transaction ID : SA11.12883**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN COUGHLIN**

Mailing Address **13 WALTON LANE**

City **WAKEFIELD** State **MA** Zip Code **01880-1035**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 20 / 2012**

**Transaction ID : SA11.12311**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **11 MAGNOLIA DR**

City **LYNNFIELD** State **MA** Zip Code **01940-1309**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12640**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**PAUL CRANEY**

Mailing Address **13 BARTON SQ**

City **SALEM** State **MA** Zip Code **01970-3368**

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

Name of Employer **MASSACHUSETTS FISCAL ALLIANCE** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12618**

Amount of Each Receipt this Period  
**250.00**

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRADLEY CRATE**

Mailing Address 45 OAK STREET

City State Zip Code  
BEVERLY MA 01915-2232

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

Name of Employer Occupation  
RED CURVE SOLLUTIONS CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2012

**Transaction ID : SA11.12373**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1300 N STREET NW #9

City State Zip Code  
WASHINGTON DC 20005-3688

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

Name of Employer Occupation  
CONGRESSMAN JACK KINGSTON DEPUTY CHIEF OF STAFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11.12234**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**DON CRAWFORD**

Mailing Address 49 RUTLAND SQUARE

City State Zip Code  
BOSTON MA 02118-3105

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

Name of Employer Occupation  
FUNDING RESOURCES INC OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11.12270**

Amount of Each Receipt this Period  
100.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES F. CROWLEY**

Mailing Address **6 DAWLEY RD**

City **WESTMINSTER** State **MA** Zip Code **01473-1544**

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

Name of Employer **WACHUSETT** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12323**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **9 ABIGAIL WAY #4010**

City **READING** State **MA** Zip Code **01867**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12566**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD H. CURTIS**

Mailing Address **15 HOLLY ROAD**

City **READING** State **MA** Zip Code **01867-3841**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12244**

Amount of Each Receipt this Period  
**500.00**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DOUGLAS CUTLER**

Mailing Address 130 ELM ST

City Worcester State MA Zip Code 01609-1903

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

Name of Employer CUTLER MANAGEMENT CORP Occupation REAL ESTATE DEVELOPER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11.12319**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. HELEN P. DADGAR**

Mailing Address 30 BATTLE GREEN ROAD

City Lexington State MA Zip Code 02421-6724

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11.12133**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM DARLING**

Mailing Address 24 PEQUOT ROAD

City Marblehead State MA Zip Code 01945-1202

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

Name of Employer SELF Occupation ACCOUNTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12679**

Amount of Each Receipt this Period  
500.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JANE H. DEAN**

Mailing Address **7 BRADFORD RD**

City **DANVERS** State **MA** Zip Code **01923-2317**

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

Name of Employer **MY DATA** Occupation **RECEPTIONIST**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12805**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY DECOTIS**

Mailing Address **79 BOW RIDGE ROAD**

City **LYNN** State **MA** Zip Code **01904-1063**

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

Name of Employer **TOWN LINE TEN PIN** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12235**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**DIANE DESANTIS**

Mailing Address **140 WINONA ST**

City **WEST PEABODY** State **MA** Zip Code **01960-4656**

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

Name of Employer **N E ACCOUNTS RECEIVABLE MANAGEMENT** Occupation **BUSINESS OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**510.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12438**

Amount of Each Receipt this Period  
**500.00**

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN DETORE**

Mailing Address **4 REALTON ROAD**

City **WEST ROXBURY** State **MA** Zip Code **02132-1006**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12565**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**PATRICIA A. DEVITO**

Mailing Address **651 LYNN FELLS PARKWAY**

City **MELROSE** State **MA** Zip Code **02176-2427**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12256**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**PATRICIA A. DEVITO**

Mailing Address **651 LYNN FELLS PARKWAY**

City **MELROSE** State **MA** Zip Code **02176-2427**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12662**

Amount of Each Receipt this Period  
**200.00**

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

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

**900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS DIBENEDETTO**

Mailing Address 15140 FIDDLESTICKS BLVD.

City State Zip Code  
FT. MYERS FL 33912-2437

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

Name of Employer Occupation  
JEFFERSON WATERMAN INTERNATIONAL INVESTMENT BANKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11.12371**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 15 TIMOTHY PLACE

City State Zip Code  
READING MA 01867-1377

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

Name of Employer Occupation  
FLEETSTAR FINANCIAL FINANCIAL ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2012

**Transaction ID : SA11.12731**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES DREW**

Mailing Address 10 POMEWORTH ST.

City State Zip Code  
STONEHAM MA 02180-2011

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11.12146**

Amount of Each Receipt this Period  
125.00

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

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

875.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS DRINKWATER**

Mailing Address 13 OLD SALEM PATH

City MAGNOLIA State MA Zip Code 01930-5244

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11.12388**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**ELENA P. DRISLANE**

Mailing Address 52 LYNNBROOK RD.

City LYNNFIELD State MA Zip Code 01940-1518

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

Name of Employer NORTHROP ASSOCIATES Occupation REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12775**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**DR. JESSE M. EHRENFELD**

Mailing Address 900 20TH AVE SOUTH - SUITE 1611  
SUITE 215

City NASHVILLE State TN Zip Code 37212-2250

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

Name of Employer VANDERBILT UNIV Occupation PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : SA11.12178**

Amount of Each Receipt this Period  
2500.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MS. SUSAN M. EID**

Mailing Address 1103 PRINCE ST

City State Zip Code  
ALEXANDRIA VA 22314-2934

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

Name of Employer Occupation  
DIRECTV ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11.12359**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 45 OAK HILL ST

City State Zip Code  
NEWTON MA 02459-3454

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12659**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ERIC EMERSON**

Mailing Address 15 HAZEN AVENUE

City State Zip Code  
DANVERS MA 01923-4010

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

Name of Employer Occupation  
GALE FORCE CONSULTING PARTNERS, LLC CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12578**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT ERCOLINI**

Mailing Address 195 BRIDLE PATH

City State Zip Code  
N. ANDOVER MA 01845-2009

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
KEE 55 INC EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.12544**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**ELLEN L. FAIELLA**

Mailing Address 4 MCLEAN ROAD

City State Zip Code  
SAUGUS MA 01906-3111

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC TOWN CLERK

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.12781**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH FANALE**

Mailing Address 11 IROQUOIS ROAD

City State Zip Code  
DANVERS MA 01923-1232

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.12767**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL FARB**

Mailing Address **21 PUDDINGSTONE LANE**

City **NEWTON** State **MA** Zip Code **02459-3446**

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

Name of Employer **HIGHFIELDS** Occupation **ANALYST**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12485**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **8 NORWOOD AVE**

City **ROCKPORT** State **MA** Zip Code **01966-1715**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12540**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**GREGORY C. FARLEY**

Mailing Address **12 MICHAEL ROAD**

City **WAKEFIELD** State **MA** Zip Code **01880-3612**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12855**

Amount of Each Receipt this Period  
**350.00**

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

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

**1600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTINE FARO**

Mailing Address **3 WIMBLEDON COURT**

City **IPSWICH** State **MA** Zip Code **01938-3026**

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

Name of Employer **SOLE PRACTIONER** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11.12157**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**AIDAN G. FEENEY**

Mailing Address **6 COLONIAL LN**

City **CANTON** State **MA** Zip Code **02021-1603**

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

Name of Employer **FEENEY BROTHERS EXCAVATION** Occupation **COO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12598**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**BRENDAN M. FEENEY**

Mailing Address **P.O. BOX 220801**

City **DORCHESTER** State **MA** Zip Code **02122-0022**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12599**

Amount of Each Receipt this Period  
**500.00**

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

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

**1500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>ROBERT FIELDS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address 127 FRANKLIN STREET		<b>Transaction ID : SA11.12581</b>
City STONEHAM	State MA	Zip Code 02180-1825
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer ARIDIAN TECHNOLOGY COMPANY	Occupation SALES	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>ARTHUR J. FINKELSTEIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012
Mailing Address 55 WALDINGFIELD ROAD		<b>Transaction ID : SA11.12656</b>
City IPSWICH	State MA	Zip Code 01938-2738
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>MR. LEE A. FITZPATRICK JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 15 KING ROAD		<b>Transaction ID : SA11.12443</b>
City LYNNFIELD	State MA	Zip Code 01940-2225
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer MINUTEMAN SERVICES	Occupation MEALS ON WHEELS DRIVER/NUTRITION SI	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SEAN FITZPATRICK**

Mailing Address **9 LT BUCK DRIVE**

City **WILMINGTON** State **MA** Zip Code **01887-2279**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12551**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. PETER C. FLOMP**

Mailing Address **15 WINTHROP ST**

City **DANVERS** State **MA** Zip Code **01923-2132**

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

Name of Employer **SELF EMPLOYED** Occupation **SELF EMPLOYED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**315.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12242**

Amount of Each Receipt this Period  
**40.00**

**C.** Full Name (Last, First, Middle Initial)  
**SCOTT M. FRASCA**

Mailing Address **2 MADDABON PLACE**

City **PEABODY** State **MA** Zip Code **01960-3644**

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

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12794**

Amount of Each Receipt this Period  
**50.00**

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

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

**340.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRANCOIS GADENNE**

Mailing Address **1 ABERNATHY LANE**

City **MARBLEHEAD** State **MA** Zip Code **01945-1161**

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

Name of Employer **RIIA** Occupation **CHAIRMAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2012**

**Transaction ID : SA11.12730**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**FRANK A. GAGLIARDI**

Mailing Address **36 PILGRIM RD**

City **MELROSE** State **MA** Zip Code **02176-3019**

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

Name of Employer **LEAGUE SCHOOL** Occupation **EDUCATOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12555**

Amount of Each Receipt this Period  
**125.00**

**C.** Full Name (Last, First, Middle Initial)  
**LISA COSIMANO GALLAGHER**

Mailing Address **4 PERKINS WAY**

City **NEWBURYPORT** State **MA** Zip Code **01950-4016**

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

Name of Employer **HAWTAN LEATHERS, LLC** Occupation **LEATHER MANUFACTURER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12624**

Amount of Each Receipt this Period  
**50.00**

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

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

**675.00**

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

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

FOR LINE NUMBER: PAGE 44 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEROME H. GANCZUK**

Mailing Address 75 SPRING VIEW DR

City LYNN State MA Zip Code 01904-2033

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

Name of Employer VERIZON Occupation TELECOM WORKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12797**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**MARIA & ROBERT GAUVAIN**

Mailing Address 22 NELSON STREET

City GEORGETOWN State MA Zip Code 01833-2401

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

Name of Employer PIONEER INVESTMENTS Occupation HEAD OF TRADING

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12590**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 9 BROOKHEAD AVENUE

City BEVERLY State MA Zip Code 01915-2035

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

Name of Employer MIDDLESEX COMMUNITY COLLEGE Occupation PROFESSOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **785.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11.12158**

Amount of Each Receipt this Period  
**50.00**

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

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

**600.00**

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

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

FOR LINE NUMBER: PAGE 45 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY GENNETTI**

Mailing Address **21 DAPPER DARBY DR**

City **STONEHAM** State **MA** Zip Code **02180-1985**

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

Name of Employer **LAZ PARKING** Occupation **DIRECTOR OF OPERATIONS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12431**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **20 ROWES WHARF**

City **BOSTON** State **MA** Zip Code **02110-3325**

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

Name of Employer **GERAGHTY ASSOCIATES** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12861**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**NICK J. GIACOUMAKIS**

Mailing Address **8 IRONWOOD RD**

City **WINDHAM** State **NH** Zip Code **03087-1264**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12301**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. GEORGIA B. GIBBONS**

Mailing Address **60R MARMION WAY**

City **ROCKPORT** State **MA** Zip Code **01966-1926**

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

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12779**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **90 ALTAMONT AVE**

City **MELROSE** State **MA** Zip Code **02176-4202**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12514**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**PETER GIZZI**

Mailing Address **90 ALTAMONT AVE**

City **MELROSE** State **MA** Zip Code **02176-4202**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12790**

Amount of Each Receipt this Period  
**150.00**

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

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

**500.00**

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

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

FOR LINE NUMBER: PAGE 47 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GARY M. GOLDSTEIN**

Mailing Address **900 CUMMINGS CENTER  
STE 302T**

City **BEVERLY** State **MA** Zip Code **01915-6181**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12466**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **117 CLINTON ROAD**

City **BROOKLINE** State **MA** Zip Code **02445-5842**

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

Name of Employer **K&L GATES LLP** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12321**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. LARRY R. GOTTESDIENER**

Mailing Address **2150 WASHINGTON STREET**

City **NEWTON** State **MA** Zip Code **02462-1498**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12473**

Amount of Each Receipt this Period  
**2500.00**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN F. GOVER**

Mailing Address 100 PARK TERRACE DRIVE  
UNIT 123

City Stoneham State MA Zip Code 02180-4411

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : SA11.12632**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL GRABAUSKAS**

Mailing Address 425 SOUTH ST  
APT 3204

City Honolulu State HI Zip Code 96813-5063

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

Name of Employer Occupation  
HONOLULU AUTHORITY FOR RAPID TRANSI EXECUTIVE DIRECTOR AND CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3076.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2012

**Transaction ID : SA11.12195**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW GRAFF**

Mailing Address 201 WEBSTER WOODS LANE

City North Andover State MA Zip Code 01845-5731

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11.12313**

Amount of Each Receipt this Period  
500.00

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

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

1200.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL M. GUANCI**

Mailing Address **54 CROSS LANE**

City **BEVERLY** State **MA** Zip Code **01915-3824**

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

Name of Employer **SUPER SUB AND CASUAL CATERING** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12634**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **128 BEACON STREET**

City **BOSTON** State **MA** Zip Code **02116-1543**

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

Name of Employer **NATIXIS** Occupation **PRESIDENT & CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12366**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MARK HALL**

Mailing Address **21 SPRING ST**

City **ESSEX** State **MA** Zip Code **01929-1311**

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

Name of Employer **HUNNEMAN CAPITAL** Occupation **INVESTMENTS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12369**

Amount of Each Receipt this Period  
**500.00**

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

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

**3100.00**

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

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

FOR LINE NUMBER: PAGE 50 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN J. HARRINGTON**

Mailing Address 19 NORWOOD HEIGHTS

City State Zip Code  
GLOUCESTER MA 01930-1212

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 29 2012

**Transaction ID : SA11.12450**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN M. HARRINGTON III**

Mailing Address 5 SHEFFIELD WEST

City State Zip Code  
WINCHESTER MA 01890-3526

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

Name of Employer Occupation  
SELF EMPLOYED FINANCIAL SERVICES PROFESSIONAL

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 02 2012

**Transaction ID : SA11.12785**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**BRUCE HERZFELDER**

Mailing Address 133 BEACH STREET

City State Zip Code  
COHASSET MA 02025-1430

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

Name of Employer Occupation  
SELF BUSINESS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 24 2012

**Transaction ID : SA11.12336**

Amount of Each Receipt this Period  
2500.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>ANDREW J. HIMMEL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address P.O. BOX 850704		<b>Transaction ID : SA11.12218</b>
City BRAintree	State MA	Zip Code 02185-0704
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer SELF	Occupation CONSERVATIVE GAY ANTIQUE DEALER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>ANDREW J. HIMMEL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address P.O. BOX 850704		<b>Transaction ID : SA11.12588</b>
City BRAintree	State MA	Zip Code 02185-0704
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer SELF	Occupation CONSERVATIVE GAY ANTIQUE DEALER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>WILLIAM F. HOFMANN III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address 223 RUTLEDGE RD.		<b>Transaction ID : SA11.12637</b>
City BELMONT	State MA	Zip Code 02478-2632
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer INSURANCE AGENT	Occupation SELF	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HUBERT HOLLEY**

Mailing Address **28 AVON ST APT 2**

City **MALDEN** State **MA** Zip Code **02148-7308**

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

Name of Employer **MBTA** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12687**

Amount of Each Receipt this Period  
**125.00**

**B.** Full Name (Last, First, Middle Initial)  
**THEODORA W. HOOTON**

Mailing Address **55 WHEATLEY ROAD**

City **GLEN HEAD** State **NY** Zip Code **11545-2907**

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

Name of Employer **WINTHROP UNIVERSITY HOSPITAL** Occupation **TRUSTEE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12864**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**PHYLLIS J. HULL**

Mailing Address **14 INDIAN HILL ROAD**

City **WAKEFIELD** State **MA** Zip Code **01880-1110**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12772**

Amount of Each Receipt this Period  
**50.00**

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

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

**1175.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEAN INMAN**

Mailing Address 457 CENTRAL ST

City AVON State MA Zip Code 02322-1509

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

Name of Employer NECNE Occupation EDUCATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11.12326**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 160 FEDERAL ST

City BOSTON State MA Zip Code 02110-1700

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12224**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL J. JICK**

Mailing Address 15 LAWRENCE RD

City CHESTNUT HILL State MA Zip Code 02467-1201

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

Name of Employer HIGHVISTA STRATEGIES LLC Occupation MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12493**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 54 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BOB JODICE**

Mailing Address **6 THWING RD**

City **LYNNFIELD** State **MA** Zip Code **01940-1734**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12557**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT J. JOYCE**

Mailing Address **1805 LEWIS O'GRAY DRIVE**

City **SAUGUS** State **MA** Zip Code **01906-4417**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12765**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN T. KAIN**

Mailing Address **65 FOX RUN RD**

City **HAMILTON** State **MA** Zip Code **01982-1907**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12477**

Amount of Each Receipt this Period  
**2500.00**

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

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

**2800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM KAROL**

Mailing Address **750 MARRETT RD**

City **LEXINGTON** State **MA** Zip Code **02421-7309**

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

Name of Employer **KODA** Occupation **BUSINESS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12549**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **9648 LEE BLVD**

City **LEAWOOD** State **KS** Zip Code **66206-2263**

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

Name of Employer **EXCEL CONSTRUCTORS** Occupation **VICE PRESIDENT, CFO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2012**

**Transaction ID : SA11.12711**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**PAUL KEENAN**

Mailing Address **173 PLEASANT ST. UNIT 401**

City **CAMBRIDGE** State **MA** Zip Code **02139-4651**

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

Name of Employer **HARVARD UNIVERSITY** Occupation **UNIVERSITY ADMIN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 20 / 2012**

**Transaction ID : SA11.12193**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRADFORD E. KEENE**

Mailing Address **76 LOCKSLEY ROAD**

City **LYNNFIELD** State **MA** Zip Code **01940-1448**

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

Name of Employer **LAW OFFICES OF BRAD ELIOT KEEN, LLC** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12358**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **118 MAIN ST.**

City **TOPSFIELD** State **MA** Zip Code **01983-1422**

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

Name of Employer **DUTTON FAMILY CARE ASSOCIATES** Occupation **PHYSICIAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12621**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**JOHN KIDD**

Mailing Address **118 MAIN ST.**

City **TOPSFIELD** State **MA** Zip Code **01983-1422**

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

Name of Employer **DUTTON FAMILY CARE ASSOCIATES** Occupation **PHYSICIAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2012**

**Transaction ID : SA11.12719**

Amount of Each Receipt this Period  
**125.00**

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

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

**1625.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN KIDD**

Mailing Address 118 MAIN ST.

City State Zip Code  
TOPSFIELD MA 01983-1422

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

Name of Employer Occupation  
DUTTON FAMILY CARE ASSOCIATES PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2012

**Transaction ID : SA11.12727**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MAUREEN E. KIDD**

Mailing Address 118 MAIN ST.  
BARE HILL FARM

City State Zip Code  
TOPSFIELD MA 01983-1422

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

Name of Employer Occupation  
SELF NURSE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2012

**Transaction ID : SA11.12710**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE E. KING**

Mailing Address 25 HUDSON ST

City State Zip Code  
LYNN MA 01904-2510

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

Name of Employer Occupation  
US GOVERNMENT U S ARMY (RETIRED)

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2012

**Transaction ID : SA11.12206**

Amount of Each Receipt this Period  
50.00

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 58 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PATRICE LAMY**

Mailing Address 186 HIGH STREET

City State Zip Code  
NEWBURYPORT MA 01950-3823

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12807**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN LECHNER IV**

Mailing Address 2 COBB AVE

City State Zip Code  
MANCHESTER MA 01944-1442

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12657**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ERIC LEVY**

Mailing Address 53 GERALD ROAD

City State Zip Code  
MARBLEHEAD MA 01945-2070

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

Name of Employer Occupation  
LINCOLN FINANCIAL GROUP EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12507**

Amount of Each Receipt this Period  
250.00

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 59 OF 228  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL LEVY**

Mailing Address **84 HIGH ST**

City **MEDFORD** State **MA** Zip Code **02155-3844**

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

Name of Employer **SELF** Occupation **DENTIST**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12446**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **333 CENTRAL PARK WEST #26**

City **NEW YORK** State **NY** Zip Code **10025-7104**

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

Name of Employer **HARVARD UNIVERSITY/CAMBRIDGE LEADEI** Occupation **TEACHER/CONSULTANT**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2012**

**Transaction ID : SA11.12847**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**KEITH LITTLEFIELD**

Mailing Address **3 NAPLES AVE**

City **SAUGUS** State **MA** Zip Code **01906-3049**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12515**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PETER MADSEN**

Mailing Address **22 SOGINESE RD**

City **ESSEX** State **MA** Zip Code **01929**

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

Name of Employer **EDO ESSEX PROPERTIES** Occupation **REAL ESTATE DEVELOPMENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12613**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MS. ANNE M. MANNING-MARTIN**

Mailing Address **37 DEXTER STREET**

City **PEABODY** State **MA** Zip Code **01960-6313**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12267**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**MS. ANNE M. MANNING-MARTIN**

Mailing Address **37 DEXTER STREET**

City **PEABODY** State **MA** Zip Code **01960-6313**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12859**

Amount of Each Receipt this Period  
**200.00**

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

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

**650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**A CARMEN MARCIANO**

Mailing Address **27 LAKESHORE AVE**

City **BEVERLY** State **MA** Zip Code **01915-1907**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12228**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**A CARMEN MARCIANO**

Mailing Address **27 LAKESHORE AVE**

City **BEVERLY** State **MA** Zip Code **01915-1907**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12643**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**ERNEST MARKEY**

Mailing Address **22 PINE STREET**

City **LYNNFIELD** State **MA** Zip Code **01940-2524**

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

Name of Employer **MBTA** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11.12151**

Amount of Each Receipt this Period  
**175.00**

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

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

**475.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH MARKEY**

Mailing Address **22 PINE STREET**

City **LYNNFIELD** State **MA** Zip Code **01940-2524**

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

Name of Employer **NONE** Occupation **STUDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12567**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **ST. JOSEPH COLLEGE 278 WHITE BRIDG**

City **STANDISH** State **ME** Zip Code **04084**

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

Name of Employer **STUDENT** Occupation **STUDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12700**

Amount of Each Receipt this Period  
**125.00**

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE J. MARKOS**

Mailing Address **1 LONGMEADOW DRIVE**

City **IPSWICH** State **MA** Zip Code **01938-1133**

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

Name of Employer **YELL-O-GLOW CORP** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12222**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1625.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE J. MARKOS**

Mailing Address **1 LONGMEADOW DRIVE**

City **IPSWICH** State **MA** Zip Code **01938-1133**

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

Name of Employer **YELL-O-GLOW CORP** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12737**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN G. MARKOS**

Mailing Address **306 HIGH ST.  
P.O. BOX 186**

City **IPSWICH** State **MA** Zip Code **01938-1251**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12360**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**DONALD G. MARTIN**

Mailing Address **27 BERRYWOOD LANE**

City **BEVERLY** State **MA** Zip Code **01915-1205**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **PROGRAM COORDINATOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12763**

Amount of Each Receipt this Period  
**50.00**

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

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

**2700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M. MARTIN**

Mailing Address **37 DEXTER STREET**

City **PEABODY** State **MA** Zip Code **01960-6313**

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

Name of Employer **MBTA** Occupation **ELECTRICAL ENGINEER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12261**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN M. MARTIN**

Mailing Address **37 DEXTER STREET**

City **PEABODY** State **MA** Zip Code **01960-6313**

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

Name of Employer **MBTA** Occupation **ELECTRICAL ENGINEER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12856**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**BRIAN MCCARTHY**

Mailing Address **38 THOREAU CIRCLE**

City **BEVERLY** State **MA** Zip Code **01915-1346**

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

Name of Employer **ENERGI, INC.** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12541**

Amount of Each Receipt this Period  
**500.00**

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

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

**750.00**



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

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

FOR LINE NUMBER: PAGE 65 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN MCCARTHY**

Mailing Address **1 PIERCE ROAD**

City **PEABODY** State **MA** Zip Code **01960-3711**

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

Name of Employer **ENERGI INSURANCE SERVICES INC.** Occupation **INSURANCE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : SA11.12217**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**DONALD J. MCINNIS**

Mailing Address **139 OLD BILLERICA RD**

City **BEDFORD** State **MA** Zip Code **01730-1265**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12568**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN (JACK) F. MCLAUGHLIN**

Mailing Address **4 D'ORLANDO WAY**

City **DANVERS** State **MA** Zip Code **01923-1476**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12784**

Amount of Each Receipt this Period  
**50.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOYCE E. MELKONIAN**

Mailing Address **33 BEACON STREET**

City **STONEHAM** State **MA** Zip Code **02180-1401**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12508**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**PAUL A. MELKONIAN**

Mailing Address **31 BROADWAY**

City **LYNN** State **MA** Zip Code **01904-1858**

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

Name of Employer **SELF** Occupation **RE SALES**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12773**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. NICK S. MENINNO**

Mailing Address **13 SUPREME COURT**

City **SWAMPSCOTT** State **MA** Zip Code **01907-2172**

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

Name of Employer **MENINNO CONSTRUCTION** Occupation **CONTRACTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12435**

Amount of Each Receipt this Period  
**500.00**

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

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

**2550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. MERULLO**

Mailing Address 370 CHESTNUT ST

City LYNNFIELD State MA Zip Code 01940-1638

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

Name of Employer: EZ DISPOSAL SERVICE INC  
Occupation: DISPOSAL CONTRACTOR/PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 29 / 2012

**Transaction ID : SA11.12447**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 126 MERRIMAC ST  
UNIT 48

City NEWBURYPORT State MA Zip Code 01950-2449

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

Name of Employer: CHILDREN AND THE LAW PROGRAM  
Occupation: SOCIAL WORKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 275.00

Date of Receipt: 11 / 02 / 2012

**Transaction ID : SA11.12798**

Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
**MARIA N. MIARA**

Mailing Address 145 LOWELL STREET

City LYNNFIELD State MA Zip Code 01940-1057

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

Name of Employer: NORTHRUP ASSOCIATES  
Occupation: REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 11 / 02 / 2012

**Transaction ID : SA11.12766**

Amount of Each Receipt this Period: 100.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES MINCHELLO**

Mailing Address 1219 MAIN STREET

City LYNNFIELD State MA Zip Code 01940-1031

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

Name of Employer JP MORGAN Occupation FINANCIAL ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12703**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 7 ASHLEY CR

City LYNNFIELD State MA Zip Code 01940-1779

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2012

**Transaction ID : SA11.12187**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**COL. (RETI JOHN A. MOORE**

Mailing Address 78 WOODS AVE.

City SOMERVILLE State MA Zip Code 02144-1119

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12246**

Amount of Each Receipt this Period  
100.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL MORABITO**

Mailing Address **8581 SANTA MONICA BLVD**

City **WEST HOLLYWOOD** State **CA** Zip Code **90069-4120**

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

Name of Employer **SELF EMPLOYED** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12346**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **11 SYCAMORE RD**

City **NORTH QUINCY** State **MA** Zip Code **02171-1336**

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

Name of Employer **MARCUS, ERNICO, EMMER & BROOKS** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12476**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**DAVID K. MORROW**

Mailing Address **1840 E BROCKER RD**

City **METAMORA** State **MI** Zip Code **48455-9789**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12481**

Amount of Each Receipt this Period  
**2500.00**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM MOSAKOWSKI**

Mailing Address **748 HUMPHREY STREET**

City **SWAMPSCOTT** State **MA** Zip Code **01907-2825**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12556**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD A. MOTTOLO**

Mailing Address **432 PARK STREET**

City **NORTH READING** State **MA** Zip Code **01864-2134**

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

Name of Employer **SERVICE PUMPING DRAIN CO INC** Occupation **MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12439**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**MIKE MOTZKIN**

Mailing Address **410 SALEM STREET, #405**  
**#405**

City **WAKEFIELD** State **MA** Zip Code **01880**

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

Name of Employer **EMPIRE RECYCLING** Occupation **SALES MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12592**

Amount of Each Receipt this Period  
**150.00**

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

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

**900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GERARD W. MOYNIHAN**

Mailing Address **25 MARSHALL STREET**

City **NORTH READING** State **MA** Zip Code **01864-3013**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12636**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN A. MULLOY**

Mailing Address **27 OX ROAD**

City **BILLERICA** State **MA** Zip Code **01821-4439**

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

Name of Employer **NORTHEASTERN UNIVERSITY** Occupation **POLICE OFFICER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12771**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**FRED MUZI**

Mailing Address **10 POWISSET ST.**

City **DOVER** State **MA** Zip Code **02030-1601**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12239**

Amount of Each Receipt this Period  
**200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL NAKAMOTO**

Mailing Address **238 HIGHLAND AVE**

City **WINCHESTER** State **MA** Zip Code **01890-2137**

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

Name of Employer **NORTH AMERICAN FAMILY INSTITUTE** Occupation **MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1151.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2012**

**Transaction ID : SA11.12724**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **9 SAGAMORE RD**

City **IPSWICH** State **MA** Zip Code **01938-2703**

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

Name of Employer **AMESBURY PSYCHOLOGICAL CENTER, INC** Occupation **BEHAVIORAL HEALTH ADMINISTRATOR/LM**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12489**

Amount of Each Receipt this Period  
**125.00**

**C.** Full Name (Last, First, Middle Initial)  
**JEANNE L. NICHOLSON**

Mailing Address **47 PROSPECT ST**

City **NEWBURYPORT** State **MA** Zip Code **01950-2840**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12644**

Amount of Each Receipt this Period  
**300.00**

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

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

**675.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CONSTANCE A. NOBLE**

Mailing Address 175 MONUMENT FARM ROAD

City State Zip Code  
CONCORD MA 01742-5345

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : SA11.12356**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE L. NOBLE**

Mailing Address 175 MONUMENT FARM ROAD

City State Zip Code  
CONCORD MA 01742-5345

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

Name of Employer Occupation  
NOBLE PARTNERS INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : SA11.12355**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**LEILA NOVELETSKY**

Mailing Address 47 HARVARD ST. APT A404

City State Zip Code  
CHARLESTOWN MA 02129-3766

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2012

**Transaction ID : SA11.12182**

Amount of Each Receipt this Period  
2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>WILLIAM O' BRIEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 19 / 2012
Mailing Address 1217 DELAFIELD PL., NW		<b>Transaction ID : SA11.12174</b>
City WASHINGTON	State DC	
Zip Code 20011-4417		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Name of Employer AMGEN	Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>HARRY OGDEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 10 KETTLE WAY		<b>Transaction ID : SA11.12257</b>
City DRACUT	State MA	
Zip Code 01826-2757		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Name of Employer MORTGAGE FINANCIAL	Occupation MANAGEMENT
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>ROBERT OKEEFE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2012
Mailing Address 122 PLEASANT STREET		<b>Transaction ID : SA11.12191</b>
City WINCHENDON	State MA	
Zip Code 01475-1636		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	Name of Employer INTEGRATED IT SOLUTIONS	Occupation ACCOUNT MANAGER
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN PACILLO**

Mailing Address **2B SHORE DRIVE**

City **PEABODY** State **MA** Zip Code **01960-3087**

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

Name of Employer **RETIRED** Occupation **QUALITY CONTROL TECH.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12639**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES P. PALANO**

Mailing Address **20 TURNBULL AVE.**

City **WAKEFIELD** State **MA** Zip Code **01880-5007**

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

Name of Employer **SELF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12442**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**EDWARD A. PALLESCHI**

Mailing Address **1 ELLIS RD**

City **SWAMPSCOTT** State **MA** Zip Code **01907-1904**

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

Name of Employer **COMMUNITY CREDIT UNION OF LYNN** Occupation **BANKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12800**

Amount of Each Receipt this Period  
**50.00**

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

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

**200.00**

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

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

FOR LINE NUMBER: PAGE 76 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CLAIRE PALLOTTA**

Mailing Address **223 BARTHOLOMEW ST**

City **PEABODY** State **MA** Zip Code **01960-4927**

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

Name of Employer **SELF-EMPLOYED** Occupation **BROKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 /  /

**Transaction ID : SA11.12361**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **18 ROOSEVELT RD**

City **MEDFORD** State **MA** Zip Code **02155-2519**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 /  /

**Transaction ID : SA11.12406**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. EUGENE M. PASSARO**

Mailing Address **41 WALSH AVE**

City **STONEHAM** State **MA** Zip Code **02180-1515**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 /  /

**Transaction ID : SA11.12607**

Amount of Each Receipt this Period  
**50.00**

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

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

**1150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CRAIG D. PESKIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 790 BOYLSTON ST APT 5H		<b>Transaction ID : SA11.12492</b>
City BOSTON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer HIGHFIELDS CAPITAL MANAGEMENT	Occupation INVESTMENT MANAGER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN PETROU</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2012
Mailing Address 82 MARMION WAY		<b>Transaction ID : SA11.12718</b>
City ROCKPORT	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation NONE	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. MARILYN PHILLIPS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012
Mailing Address 7 MIRABEAU LANE		<b>Transaction ID : SA11.12854</b>
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NORTHRUP ASSOCIATES	Occupation REALTOR	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CANDICE PHIPPS**

Mailing Address 565 PENNSYLVANIA AVE., NW APT. 902

City WASHINGTON State DC Zip Code 20001-4940

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

Name of Employer ENDO HEALTH SOLUTIONS Occupation GOVERNMENT AFFAIRS DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12593**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1180 MAIN STREET

City WAKEFIELD State MA Zip Code 01880-4116

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12263**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN POLANSKY**

Mailing Address 3 MELODY LANE

City LYNNFIELD State MA Zip Code 01940-1267

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation RETIRED LMHC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : SA11.12353**

Amount of Each Receipt this Period  
125.00

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM E. POLLACK**

Mailing Address 109 SPRING STREET

City State Zip Code  
STONEHAM MA 02180-1441

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SA11.12866**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM A. POLLMAN**

Mailing Address 8 BARTLETT STREET

City State Zip Code  
MERRIMAC MA 01860-2003

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

Name of Employer Occupation  
IPS, INC COURIER/SEMI-RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : SA11.12754**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**GREG PORTER**

Mailing Address P.O. BOX 22492

City State Zip Code  
KANSAS CITY MO 64113-0492

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

Name of Employer Occupation  
SELF CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2012

**Transaction ID : SA11.12708**

Amount of Each Receipt this Period  
1000.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID PORTMAN**

Mailing Address **34 ELLEN RD**

City **STONEHAM** State **MA** Zip Code **02180-1500**

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

Name of Employer **ACTION AMBULANCE SER. INC** Occupation **BUS. EXEC.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12498**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **34 ELLEN RD**

City **STONEHAM** State **MA** Zip Code **02180-1500**

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

Name of Employer **ACTION AMBULANCE SER. INC** Occupation **BUS. EXEC.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12780**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**SHARON D. RANDALL**

Mailing Address **4 PIERCE ST.**

City **MARBLEHEAD** State **MA** Zip Code **01945-2906**

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

Name of Employer **CROWE & MULVEY** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**860.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12238**

Amount of Each Receipt this Period  
**100.00**

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

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

**350.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ANTHONY RAVOSA**

Mailing Address 21 CHATHAM HILL ROAD

City SOUTH GLASTONBURY State CT Zip Code 06073-3543

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

Name of Employer VINCE GROUP, INC. Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12625**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 18 VILLAGE RD.

City PEPPERELL State MA Zip Code 01463-1181

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12786**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**WARREN RAZZABONI**

Mailing Address 12 HAZEL ST.

City HOLLIS State NH Zip Code 03049-6510

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

Name of Employer NATIONAL COMPUTER DIRECT HOLLIS NH Occupation WEARHOUSE MAG

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.12759**

Amount of Each Receipt this Period  
500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WARREN A. RAZZABONI SR.**

Mailing Address 12 HAZEL STREET

City HOLLIS State NH Zip Code 03049-6510

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12750**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES K. RIBAKOFF**

Mailing Address PO BOX 912

City WORCESTER State MA Zip Code 01613-0912

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

Name of Employer AUTOMATIC MANAGEMENT INC Occupation EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12486**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH RICUPERO**

Mailing Address 500 PLEASANT ST

City WINTHROP State MA Zip Code 02152-2754

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12465**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JERRY RITTENHOUSE**

Mailing Address **3 WOODLAND RD**

City **STONEHAM** State **MA** Zip Code **02180-1702**

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

Name of Employer **MYSTIC VALLEY UROLOGY** Occupation **PHYSICIAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12698**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL J. ROBERTS**

Mailing Address **437 MARLBOROUGH ST #21**

City **BOSTON** State **MA** Zip Code **02115-1226**

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

Name of Employer **HARVARD UNIVERSITY** Occupation **PROFESSOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12463**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**MITCHELL J. ROBERTS**

Mailing Address **245 WOODWARD ST**

City **WABAN** State **MA** Zip Code **02468-2028**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **BUSINESS OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12470**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES P. ROSENFELD**

Mailing Address **16 PARKER STREET**

City **LEXINGTON** State **MA** Zip Code **02421-4907**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12464**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **1 BEACON STREET FLOOR 25**

City **BOSTON** State **MA** Zip Code **02108-3141**

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

Name of Employer **SELF** Occupation **LIFE INSURANCE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12325**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT A. ROTONDI**

Mailing Address **67 ORCHARD LANE**

City **MELROSE** State **MA** Zip Code **02176-2917**

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

Name of Employer **D&R PAVING** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12445**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARK H. RUBIN**

Mailing Address **84 BIGELOW RD**

City **WEST NEWTON** State **MA** Zip Code **02465-3006**

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

Name of Employer **MARIC, INC.** Occupation **BUSINESS MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12484**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **686 HALE STREET**

City **BEVERLY** State **MA** Zip Code **01915-2119**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11.12155**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. SAL J. SACRO**

Mailing Address **SACRO PLAZA  
142 SCHOOL ST**

City **EVERETT** State **MA** Zip Code **02149-3455**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12299**

Amount of Each Receipt this Period  
**1500.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. SAIA**

Mailing Address **6 GRANT ST**

City **DANVERS** State **MA** Zip Code **01923-3018**

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

Name of Employer **SELF** Occupation **XTECHNOLOGY GLOBAL**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12755**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **3 SPEARFIELD LN.**

City **LYNNFIELD** State **MA** Zip Code **01940-2554**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12429**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **30 SARAH WAY**

City **CONCORD** State **MA** Zip Code **01742-3725**

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

Name of Employer **WAKEFIELD INVESTMENTS INC** Occupation **INVESTMENTS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11.12611**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. R. DAVID SCHELZI</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012	
Mailing Address P.O. BOX 540		<b>Transaction ID : SA11.12275</b>	
City WAKEFIELD	State MA	Zip Code 01880-4440	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer WAKEFIELD INVESTMENTS INC.	Occupation PRESIDENT		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) <b>B. JORDAN SCHWARTZ</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 475 K STREET, NW		<b>Transaction ID : SA11.12576</b>	
City WASHINGTON	State DC	Zip Code 20001-5252	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SKADDEN, ARPS	Occupation ATTORNEY		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>C. KEVIN SEXTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2012	
Mailing Address 20 EMERSON STREET		<b>Transaction ID : SA11.12545</b>	
City READING	State MA	Zip Code 01867-1022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00	
Name of Employer CENTURY 21	Occupation REALTOR		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 610.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	875.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN J. SHAFFER**

Mailing Address 524 LOWELL STREET

City LYNNFIELD State MA Zip Code 01940-1640

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

Name of Employer LINEAR TECH Occupation ELECTRICAL ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1075.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12584**

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JANICE A. SHEEHAN**

Mailing Address 16 ORCHARD LANE

City LYNNFIELD State MA Zip Code 01940-1147

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12630**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. PETER SHERWOOD**

Mailing Address 11 HART ST

City BEVERLY State MA Zip Code 01915-2120

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12461**

Amount of Each Receipt this Period  
500.00

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

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

725.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. SHUKA**

Mailing Address 184 WOODLAND MEADE

City SOUTH HAMILTON State MA Zip Code 01982-1862

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

Name of Employer SHUKA ASSOCIATES, INC. Occupation REAL ESTATE APPRAISER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11.12219**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**MATTHEW K. SIDMAN**

Mailing Address 297 COMMONWEALTH AVE  
APT 6

City BOSTON State MA Zip Code 02115-2019

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

Name of Employer HIGHFIELDS CAPTIAL Occupation INVESTMENT MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12491**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JENNIFER K. SILVER**

Mailing Address 77 POSSUM RD

City WESTON State MA Zip Code 02493-2317

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12658**

Amount of Each Receipt this Period  
1000.00

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARK J. SIMEOLA**

Mailing Address 11 STEVENS RD.

City MELROSE State MA Zip Code 02176-2113

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11.12374**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**PAUL R. SIMONINI**

Mailing Address 9 WILDWOOD DR

City PEABODY State MA Zip Code 01960-7916

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12436**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. RONALD L. SKATES**

Mailing Address 4 BOARDMAN AVENUE

City MANCHESTER BY THE SEA State MA Zip Code 01944-1406

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

Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11.12327**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>RICHARD SOLANO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 26 MARMION RD		<b>Transaction ID : SA11.12264</b>
City MELROSE	State MA	Zip Code 02176-2908
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>MR. PETER J. SOLOMON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2012
Mailing Address 68 PRESTON ST UNIT 7F		<b>Transaction ID : SA11.12733</b>
City WAKEFIELD	State MA	Zip Code 01880-2564
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer UNDISCLOSED	Occupation UNDISCLOSED	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00	

Full Name (Last, First, Middle Initial) <b>SCOTT SOLOMBRINO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 19 / 2012
Mailing Address 200 SECOND STREET		<b>Transaction ID : SA11.12181</b>
City CHELSEA	State MA	Zip Code 02150-1802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer DAV EL BOSTON INC.	Occupation CEO	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN H. SPURR JR.**

Mailing Address **24 CRESCENT AVE**

City **SCITUATE** State **MA** Zip Code **02066-4309**

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

Name of Employer **REAL ESTATE** Occupation **A.W. PORRY, INC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12411**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOANNE ST. PIERRE**

Mailing Address **29 NEWCOMB ROAD**

City **STONEHAM** State **MA** Zip Code **02180-4201**

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

Name of Employer **MASSPORT** Occupation **BUDGET DIRECTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11.12665**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**DENNIS A. STAATS**

Mailing Address **15 ARCHELAUS HILL RD**

City **WEST NEWBURY** State **MA** Zip Code **01985**

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

Name of Employer **SELF** Occupation **CONSULTING**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12306**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES STACEY**

Mailing Address 17 MERRITT ST

City MARBLEHEAD State MA Zip Code 01945-3516

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

Name of Employer STACEY & SIMPSON CONSULTING LLC Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12497**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**JARED W. STANSFIELD**

Mailing Address 7 MAGNOLIA AVE

City MANCHESTER State MA Zip Code 01944-1607

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **440.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11.12205**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**JAY B. STEPHENS**

Mailing Address 48 AYRSHIRE LANE

City CONCORD State MA Zip Code 01742-4151

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

Name of Employer ATTORNEY Occupation RAYTHEON COMPANY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11.12410**

Amount of Each Receipt this Period  
**250.00**

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

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

**450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY SULLIVAN**

Mailing Address 63 ATLANTIC AVENUE, 7C

City State Zip Code  
BOSTON MA 02110-3720

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

Name of Employer Occupation  
MINTZ LEVIN ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12449**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**SIDNEY W. SWARTZ**

Mailing Address 1001 S. OCEAN BLVD

City State Zip Code  
DELRAY BEACH FL 33483-6531

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12490**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 91 SPOFFORD STREET

City State Zip Code  
GEORGETOWN MA 01833-1321

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

Name of Employer Occupation  
ODYSSEY SYSTEMS CONSULTING GROUP, CEO - DEFENSE SERVICES COMPANY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2012

**Transaction ID : SA11.12175**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. RITA P. SWEAT**

Mailing Address **91 SPOFFORD STREET**

City **GEORGETOWN** State **MA** Zip Code **01833-1321**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12362**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address **101 BROOKSBY VILLAGE DR  
APT 111**

City **PEABODY** State **MA** Zip Code **01960-1450**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12448**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**SALVATORE TESTAVERDE**

Mailing Address **11 LAKERIDGE DRIVE**

City **GEORGETOWN** State **MA** Zip Code **01833-1401**

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

Name of Employer **SELF EMPLOYED - SEMI RETIRED** Occupation **MARINE SCIENTIST [FISH AND WHALES]**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12488**

Amount of Each Receipt this Period  
**100.00**

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

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

**3100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SARA JANE THATCHER**

Mailing Address **7 CLARK RD**

City **IPSWICH** State **MA** Zip Code **01938-2808**

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

Name of Employer **THE ARNOLD HOUSE** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12455**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MIKE A. TORRISI**

Mailing Address **38 HIGH STREET**

City **ANDOVER** State **MA** Zip Code **01810-3528**

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

Name of Employer **TORRISI & TORRISI LAW** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12434**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MS. CATHERINE TURCO**

Mailing Address **12 CLINTON STREET**

City **CAMBRIDGE** State **MA** Zip Code **02139-2304**

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

Name of Employer **MIT SLOAN SCHOOL OF MANAGEMENT** Occupation **LECTURER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12510**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**



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

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

FOR LINE NUMBER: PAGE 97 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT B. TURNAGE**

Mailing Address **7 TRILBY BRANCE**

City **LONGWOOD** State **FL** Zip Code **32779**

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

Name of Employer **SELF** Occupation **BUSINESS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11.12480**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **21 GUNNISON RD**

City **BOXFORD** State **MA** Zip Code **01921-2415**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12818**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM VAN FAASEN**

Mailing Address **12 PROCTOR STREET**

City **MANCHESTER** State **MA** Zip Code **01944-1446**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11.12357**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS VANDERVORT**

Mailing Address **212 POWDER HOUSE BLVD**

City **SOMERVILLE** State **MA** Zip Code **02144-1531**

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

Name of Employer **NEWFORMA** Occupation **PRODUCT MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 16 / 2012**

**Transaction ID : SA11.12879**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE J. VASILIADES**

Mailing Address **5 PITCAIRN WAY**

City **IPSWICH** State **MA** Zip Code **01938-1087**

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

Name of Employer **BOSTON CENTRAL MANAGEMENT GROUP** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12751**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**RUSSELL VICKERS**

Mailing Address **15 BEACH AVE**

City **SALEM** State **MA** Zip Code **01970-5707**

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

Name of Employer **N/A** Occupation **SELF EMPLOYED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12231**

Amount of Each Receipt this Period  
**500.00**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DENNIS VISCONTI**

Mailing Address 31 ELLEN ROAD

City State Zip Code  
STONEHAM MA 02180-1516

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

Name of Employer Occupation  
COMMONWEALTH OF MASSACHUSETTS STATE WORKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11.12271**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 379 RIVER ROAD

City State Zip Code  
ANDOVER MA 01810-4276

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

Name of Employer Occupation  
VROUNTAS, AYER & CHANDLER, PC ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : SA11.12347**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT S. WALKER**

Mailing Address 609 WILLOW GREEN

City State Zip Code  
LITITZ PA 17543-8369

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFF( INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2012

**Transaction ID : SA11.12746**

Amount of Each Receipt this Period  
250.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN S. WALTERS**

Mailing Address **75 BARNES HILL ROAD**

City **CONCORD** State **MA** Zip Code **01742-5609**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12441**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**HARVEY J. WAUGH**

Mailing Address **4 ORCHARD LANE**

City **LYNNFIELD** State **MA** Zip Code **01940-1147**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : SA11.12559**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT WHITE**

Mailing Address **23 CHADWICK RD**

City **WESTON** State **MA** Zip Code **02493-1523**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11.12322**

Amount of Each Receipt this Period  
**2500.00**

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

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

**2800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD WHITWORTH**

Mailing Address 40 GARLAND ST

City MELROSE State MA Zip Code 02176-4323

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12701**

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. WILLIS**

Mailing Address 109 BUTLER AVENUE

City WAKEFIELD State MA Zip Code 01880-2508

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

Name of Employer MORTGAGE MASTER, INC. Occupation LOAN ORIGINATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
475.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012

**Transaction ID : SA11.12716**

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
**LINNEA WILLMAN**

Mailing Address 237 MAIN ST APT A6

City READING State MA Zip Code 01867-3605

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

Name of Employer UNEMPLOYED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
565.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12591**

Amount of Each Receipt this Period  
50.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHANE B. WOLFE**

Mailing Address **1427 5TH STREET NW #3**

City **WASHINGTON** State **DC** Zip Code **20001-2514**

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

Name of Employer **COMMUNICATIONS DIRECTOR** Occupation **U.S. HOUSE OF REPS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 21 / 2012**

**Transaction ID : SA11.12199**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD L. WOOD JR.**

Mailing Address **52 PENDEXTER ST**

City **LYNN** State **MA** Zip Code **01904-1850**

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

Name of Employer **WOOD AND ASSOCIATES INSURANCE AGEN** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11.12795**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**GERALD C. WOODWORTH**

Mailing Address **P.O. BOX 193**

City **BOXFORD** State **MA** Zip Code **01921-0193**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12535**

Amount of Each Receipt this Period  
**50.00**

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

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

**125.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. YAREMCHUK**

Mailing Address 15 SMITH FARM TRACK

City LYNNFIELD State MA Zip Code 01940-1019

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

Name of Employer SELF Occupation SURGEON

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12483**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTOPHER J. YOUNG**

Mailing Address 3 BATTERY WHARF #3502

City BOSTON State MA Zip Code 02109

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

Name of Employer MSA MORTGAGE LLC Occupation MORTGAGE BANKING

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12245**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**MARIA YOUNG**

Mailing Address 5 FREMONT STREET

City WINTHROP State MA Zip Code 02152-2616

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12243**

Amount of Each Receipt this Period  
2500.00

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

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

4300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD E. ZUKER**

Mailing Address **PO BOX 67377**

City **CHESTNUT HILL** State **MA** Zip Code **02467-0004**

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

Name of Employer **CHESTNUT HILL REALTY** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12536**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**HOWARD J. BAYLESS**

Mailing Address **5252 6TH AVENUE SOUTH**

City **BIRMINGHAM** State **A** Zip Code **35212**

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

Name of Employer **ADDICTION MENTAL HEALTH SERVICES, IN** Occupation **DIRECTOR OF DEVELOPMENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12903**

Amount of Each Receipt this Period  
**100.00**

**[MEMO ITEM]  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTIAN A. BERLE**

Mailing Address **6 SNOWS COURT**

City **WASHINGTON** State **DC** Zip Code **20037-2213**

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

Name of Employer **COALITIONS DIRECTOR** Occupation **TISEI CONGRESSIONAL COMMITTEE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12904**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

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

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

**250.00**

**250.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 228	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROGER K. BERLE**

Mailing Address **6 ISLAND AVE**

City **CLIFF ISLAND** State **ME** Zip Code **04019**

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

Name of Employer **SELF** Occupation **WRITER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2012

**Transaction ID : SA11.POST.12899**

Amount of Each Receipt this Period  

500.00
--------

**[MEMO ITEM]**  
**EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

**B.** Full Name (Last, First, Middle Initial)  
**JEREMIAH N CARREON**

Mailing Address **326 N. WESTERN AVE., 167**

City **LOS ANGELES** State **C** Zip Code **90004**

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

Name of Employer **TRAVELODGE** Occupation **FRONT DESK**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2012

**Transaction ID : SA11.POST.12920**

Amount of Each Receipt this Period  

5.00
------

**[MEMO ITEM]**  
**EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

**C.** Full Name (Last, First, Middle Initial)  
**TIMOTHY COSTA**

Mailing Address **2801 NORTH 2ND STREET, APT A-4**  
**APT A-4**

City **HARRISBURG** State **PA** Zip Code **17110-1202**

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

Name of Employer **COMMONWEALTH OF PENNSYLVANIA** Occupation **DEPUTY SECRETARY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2012

**Transaction ID : SA11.POST.12921**

Amount of Each Receipt this Period  

250.00
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**[MEMO ITEM]**  
**EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

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

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

**0.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SARAH CUTRONA**

Mailing Address 2612 SHADOW RIDGE DR

City ARLINGTON State T Zip Code 76006

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

Name of Employer THINK FINANCE Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.POST.12915**

Amount of Each Receipt this Period  
 2500.00

**[MEMO ITEM]**  
 EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**B.** Full Name (Last, First, Middle Initial)  
**MORRIS R. GOFF**

Mailing Address 2004 11TH STREET NW #430

City WASHINGTON State DC Zip Code 20001-4053

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

Name of Employer ACLI Occupation LOBBYIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.POST.12900**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
 EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**C.** Full Name (Last, First, Middle Initial)  
**JAY HANSEN**

Mailing Address 1914 6TH STREET

City SACRAMENTO State C Zip Code 95811

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

Name of Employer CALIFORNIA MEDICAL ASSOCIATION Occupation CHIEF STRATEGY OFFICER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.POST.12906**

Amount of Each Receipt this Period  
 50.00

**[MEMO ITEM]**  
 EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MS. KIMBERLY HOOVER**

Mailing Address 1761 CHURCH ST NW

City WASHINGTON State DC Zip Code 20036-1301

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

Name of Employer KIM HOOVER R.E.D. LLC Occupation REAL ESTATE DEVELOPER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12918**

Amount of Each Receipt this Period  
**100.00**

**[MEMO ITEM]**  
 EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**B.** Full Name (Last, First, Middle Initial)  
**JACK N. JACOBSON**

Mailing Address 1701 16TH ST NW, APT 630

City WASHINGTON State D Zip Code 20009

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

Name of Employer HOGAN LOVELLS Occupation LEGISLATIVE ANALYST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **40.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12905**

Amount of Each Receipt this Period  
**40.00**

**[MEMO ITEM]**  
 EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**C.** Full Name (Last, First, Middle Initial)  
**KATHRYN LEHMAN**

Mailing Address 3106 RUSSELL RD

City ALEXANDRIA State VA Zip Code 22305-1720

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

Name of Employer HOLLAND & KNIGHT Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12901**

Amount of Each Receipt this Period  
**1000.00**

**[MEMO ITEM]**  
 EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

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

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

**0.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SARAH LONGWELL**

Mailing Address 1620 CORCORAN ST. NW, APT A

City WASHINGTON	State DC	Zip Code 20009-3032
--------------------	-------------	------------------------

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

Name of Employer BAL	Occupation DIRECTOR
-------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2012

**Transaction ID : SA11.POST.12919**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**B.** Full Name (Last, First, Middle Initial)  
**KEVIN A. MACK**

Mailing Address 1401 FIFTH AVE.

City SAN FRANCISCO	State C	Zip Code 94122
-----------------------	------------	-------------------

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

Name of Employer UNIVERSITY OF CALIFORNIA	Occupation PHYSICIAN
--	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2012

**Transaction ID : SA11.POST.12913**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT MAHLOWITZ**

Mailing Address 2488 HISTORIC DECATUR RD

City SAN DIEGO	State C	Zip Code 92106
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FEC ID number of contributing federal political committee. **C**

Name of Employer STUTZ ARTIANO SHINOFF & HOLTZ	Occupation
---	------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2012

**Transaction ID : SA11.POST.12908**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LUCIAN C. MARTINEZ</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 1811 INGLESIDE TERRACE NW		<b>Transaction ID : SA11.POST.12907</b>	
City WASHINGTON	State DC	Zip Code 20010-1009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer GILBERT LLP	Occupation ATTORNEY		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 175.00		
		<b>[MEMO ITEM]</b> EARMARKED THROUGH GAY & LESBIAN VICTORY FUND	

Full Name (Last, First, Middle Initial) <b>B. MS. TIFFANY MULLER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 3305 ALABAMA AVE SE		<b>Transaction ID : SA11.POST.12914</b>	
City WASHINGTON	State DC	Zip Code 20020-1441	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer VICTORY FUND	Occupation VP OF POLITICAL OPERATIONS		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<b>[MEMO ITEM]</b> EARMARKED THROUGH GAY & LESBIAN VICTORY FUND	

Full Name (Last, First, Middle Initial) <b>C. ARTURO NAVA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 36 PARK ST. 2		<b>Transaction ID : SA11.POST.12912</b>	
City LOWELL	State M	Zip Code 01852	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer WYLESS INC.	Occupation MANAGER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		
		<b>[MEMO ITEM]</b> EARMARKED THROUGH GAY & LESBIAN VICTORY FUND	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	0.00

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

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

FOR LINE NUMBER: PAGE 110 OF 228  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTOPHER PFAUSER**

Mailing Address **11812 RIVIERA DRIVE**

City **NEW BUFFALO** State **MI** Zip Code **49117-9251**

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

Name of Employer **ISG** Occupation **MANAGEMENT CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12916**

Amount of Each Receipt this Period  
**200.00**

**[MEMO ITEM]  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

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

Mailing Address **P.O. BOX 22492**

City **KANSAS CITY** State **MO** Zip Code **64113-0492**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12922**

Amount of Each Receipt this Period  
**1000.00**

**[MEMO ITEM]  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

**C.** Full Name (Last, First, Middle Initial)  
**CRAIG ROBERTS**

Mailing Address **916 G ST NW  
APT 505**

City **WASHINGTON** State **D** Zip Code **20001**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**199.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12902**

Amount of Each Receipt this Period  
**199.00**

**[MEMO ITEM]  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

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

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

**0.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 228
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RENEE ROSENFELD**

Mailing Address **P.O. BOX 30503**

City **BETHESDA** State **M** Zip Code **20824**

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

Name of Employer **SELF** Occupation **PRODUCER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12909**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
**EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

**B.** Full Name (Last, First, Middle Initial)  
**LYNN C. SCHULMAN**

Mailing Address **10440 QUEENS BLVD 19E**

City **FOREST HILLS** State **N** Zip Code **11375**

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

Name of Employer **WOODHULL MEDICAL CENTER** Occupation **PUBLIC RELATIONS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **199.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12910**

Amount of Each Receipt this Period  
**199.00**

**[MEMO ITEM]**  
**EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

**C.** Full Name (Last, First, Middle Initial)  
**JORDAN SCHWARTZ**

Mailing Address **475 K STREET, NW  
APARTMENT 1203**

City **WASHINGTON** State **DC** Zip Code **20001-5252**

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

Name of Employer **SKADDEN, ARPS** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.POST.12923**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**  
**EARMARKED THROUGH GAY & LESBIAN VICTORY FUND**

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

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

**0.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRETT P. SMILEY**

Mailing Address 236 HOPE ST

City Providence State R Zip Code 02906

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

Name of Employer CAMPAIGN FINANCES Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.POST.12911**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICK D. STAMBERGER**

Mailing Address 1750 16TH STREET, NW #63

City WASHINGTON State DC Zip Code 20009-3148

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

Name of Employer SMARTBRIEF, INC Occupation BUSINESS EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.POST.12917**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
EARMARKED THROUGH GAY & LESBIAN VICTORY FUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

173690.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 228	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

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

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027-1500

FEC ID number of contributing federal political committee. **C** C00504522

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12505**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 815-A BRAZOS STREET

City AUSTIN State TX Zip Code 78701-2514

FEC ID number of contributing federal political committee. **C** C00392688

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SA11.12849**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**BILLERICA REPUBLICAN TOWN COMMITTEE**

Mailing Address

City BILLERICA State MA Zip Code 99999

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2012

**Transaction ID : SA11.12381**

Amount of Each Receipt this Period  
50.00

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

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

2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. INSURANCE AGENTS & BROKERS OF MA PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 CEDAR ST

City State Zip Code  
MILFORD MA 01757-1178

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.12629**

Amount of Each Receipt this Period

**B. MARBLEHEAD REPUBLICAN TOWN COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 107

City State Zip Code  
MARBLEHEAD MA 01945-0107

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.12525**

Amount of Each Receipt this Period

**C. MASSAHU PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 137 PENNSYLVANIA AVE

City State Zip Code  
FRAMINGHAM MA 01701-8837

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.12633**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NORTH ANDOVER REPUBLICAN TOWN COMMITTEE**

Mailing Address UNKNOWN

City NORTH ANDOVER State MA Zip Code 01845

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
333.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11.12389**

Amount of Each Receipt this Period  
333.00

**B.** Full Name (Last, First, Middle Initial)  
**READING REPUBLICAN TOWN COMMITTEE**

Mailing Address 18 HIGHLAND ST

City READING State MA Zip Code 01867-2146

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012

**Transaction ID : SA11.12875**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WENHAM REPUBLICAN COMMITTEE**

Mailing Address 97 LARCH ROW

City WENHAM State MA Zip Code 01984-1621

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.12865**

Amount of Each Receipt this Period  
250.00

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

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

1583.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Mailing Address 121 N. HENRY ST

City State Zip Code  
ALEXANDRIA VA 22314-2903

FEC ID number of contributing federal political committee. **C** C00010124

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SA11.12851**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGERY PAC**

Mailing Address 9700 W BRYN MAWR AVE

City State Zip Code  
ROSEMONT IL 60018-5701

FEC ID number of contributing federal political committee. **C** C00005660

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2012

**Transaction ID : SA11.12471**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES PAC**

Mailing Address PO BOX 26366

City State Zip Code  
ALEXANDRIA VA 22313-6366

FEC ID number of contributing federal political committee. **C** C00412098

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12506**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BRANCH BANK & TRUST COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 1290

City WINSTON SALEM State NC Zip Code 27102-1290

FEC ID number of contributing federal political committee. **C** C00075291

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012

**Transaction ID : SA11.12877**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**BURGER KING FRANCHISEE PAC**

Mailing Address 1701 BARRETT LAKES BLVD NW SUITE 180

City KENNESAW State GA Zip Code 30144-4561

FEC ID number of contributing federal political committee. **C** C00329425

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12749**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**CHAMBER OF CONGRESS OF THE UNITED STATES OF AMERICA PAC**

Mailing Address 1615 H ST NW

City WASHINGTON State DC Zip Code 20062-0001

FEC ID number of contributing federal political committee. **C** C00082040

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12501**

Amount of Each Receipt this Period  
4000.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHESAPEAKE ENERGY CORPORATION FEDERAL PAC**

Mailing Address PO BOX 18576

City State Zip Code  
OKLAHOMA CITY OK 73154-0576

FEC ID number of contributing federal political committee. **C C00389288**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : SA11.12654**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**FRATERNITY & SORORITY PAC**

Mailing Address PO BOX 3435

City State Zip Code  
ALEXANDRIA VA 22302-0435

FEC ID number of contributing federal political committee. **C C00410068**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : SA11.12603**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**FREE MARKETS PAC**

Mailing Address PO BOX 470848

City State Zip Code  
CHARLOTTE NC 28247-0848

FEC ID number of contributing federal political committee. **C C00527531**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2012

**Transaction ID : SA11.12310**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GAY AND LESBIAN VICTORY FUND PAC**

Mailing Address 1133 15TH STREET, NW  
SUITE 350

City WASHINGTON State DC Zip Code 20005-2722

FEC ID number of contributing federal political committee. **C C00476978**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.POST.12898**

Amount of Each Receipt this Period  
8618.00

TOTAL EARMARKED THROUGH THIS CONDUIT, \$8,618. THIS DOES NOT AFFECT PAC LIMITS. SEE ATTRIBUTION BELOW

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

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C C00497677**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12451**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS AND BROKERS OF AMERICA PAC**

Mailing Address 412 FIRST ST SE  
SUITE 300

City WASHINGTON State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12600**

Amount of Each Receipt this Period  
2500.00

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

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

11618.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS AND BROKERS OF AMERICA PAC**

Mailing Address 412 FIRST ST SE  
SUITE 300

City WASHINGTON State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12601**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 30151 TOMAS

City RANCHO SANTA MARGARITA State CA Zip Code 92688-2125

FEC ID number of contributing federal political committee. **C C00450320**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12500**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**KBR, INC PAC**

Mailing Address 601 JEFFERSON STREET

City HOUSTON State TX Zip Code 77002-7900

FEC ID number of contributing federal political committee. **C C00431114**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12302**

Amount of Each Receipt this Period  
1500.00

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

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

6000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. LCR PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1050 CONNECTICUT AVE NW  
 STE 400  
 City WASHINGTON State DC Zip Code 20036-5369  
 FEC ID number of contributing federal political committee. **C** C00405506  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012  
**Transaction ID : SA11.12452**  
 Amount of Each Receipt this Period  
 500.00

**B. MASSACHUSETTS MUTUAL LIFE INSURANCE CO. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1295 STATE ST  
 City SPRINGFIELD State MA Zip Code 01111-0001  
 FEC ID number of contributing federal political committee. **C** C00118943  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012  
**Transaction ID : SA11.12882**  
 Amount of Each Receipt this Period  
 2000.00

**C. MAVERICK PAC USA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 CONCORD PLAZA  
 SUITE 425  
 City SAN ANTONIO State TX Zip Code 78216-6996  
 FEC ID number of contributing federal political committee. **C** C00427435  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012  
**Transaction ID : SA11.12653**  
 Amount of Each Receipt this Period  
 1000.00

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

3500.00

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

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

FOR LINE NUMBER: PAGE 122 OF 228  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City State Zip Code  
CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11.12305**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE**

Mailing Address 1600 DUKE ST

City State Zip Code  
ALEXANDRIA VA 22314-3466

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : SA11.12605**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City State Zip Code  
CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SA11.12850**

Amount of Each Receipt this Period  
3000.00

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

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

6500.00

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

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

FOR LINE NUMBER: PAGE 123 OF 228  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

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

Mailing Address **228 S WASHINGTON ST  
SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00459123**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11.12303**

Amount of Each Receipt this Period  
**3000.00**

**B.** Full Name (Last, First, Middle Initial)  
**OUR COUNTRY DESERVES BETTER POLITICAL ACTION COMMITTEE**

Mailing Address **PO BOX 984**

City **WILLOWS** State **CA** Zip Code **95988-0984**

FEC ID number of contributing federal political committee. **C C00454074**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11.12852**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **1100 WILSON BLVD  
SUITE 1500**

City **ARLINGTON** State **VA** Zip Code **22209-3900**

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11.12502**

Amount of Each Receipt this Period  
**2500.00**

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

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

**6500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**REPUBLICAN MAIN STREET PAC**

Mailing Address 1220 L STREET NW  
SUITE 100-263

City WASHINGTON State DC Zip Code 20005-4018

FEC ID number of contributing federal political committee. **C C00165159**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12290**

Amount of Each Receipt this Period  
 3000.00

**B. Full Name (Last, First, Middle Initial)**  
**REPUBLICAN MAJORITY FOR CHOICE PAC**

Mailing Address 1900 L STREET NW  
SUITE 320

City WASHINGTON State DC Zip Code 20036-5027

FEC ID number of contributing federal political committee. **C C00346635**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12499**

Amount of Each Receipt this Period  
 1000.00

**C. Full Name (Last, First, Middle Initial)**  
**SPENDING CUTS OVER TOTAL TAXATION PAC**

Mailing Address PO BOX 303

City ALEXANDRIA State VA Zip Code 22313-0303

FEC ID number of contributing federal political committee. **C C00494898**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11.12304**

Amount of Each Receipt this Period  
 5000.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC**

Mailing Address 228 S. WASHINGTON ST  
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00501478

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11.12504**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1000 NICOLLET MALL  
TPS 3275

City MINNEAPOLIS State MN Zip Code 55403-2542

FEC ID number of contributing federal political committee. **C** C00098061

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11.12478**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**TEXAS BANKERS ASSOCIATION-BANKERS PAC**

Mailing Address 203 W 10TH ST

City AUSTIN State TX Zip Code 78701-2321

FEC ID number of contributing federal political committee. **C** C00196444

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11.12602**

Amount of Each Receipt this Period  
2500.00

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

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

8500.00

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

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

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TEXTILE RENTAL SERVICES ASSOCIATION OF AMERICA PAC**

Mailing Address 1800 DIAGONAL RD  
STE 200

City ALEXANDRIA State VA Zip Code 22314-2842

FEC ID number of contributing federal political committee. **C C00279828**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : SA11.12604**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**THE HOME DEPOT INC PAC**

Mailing Address 1155 F STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SA11.12503**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**TURKISH COALITION USA PAC**

Mailing Address 1024 CONNECTICUT AVE NW  
SUITE 100

City WASHINGTON State DC Zip Code 20036-5322

FEC ID number of contributing federal political committee. **C C00432526**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2012

**Transaction ID : SA11.12884**

Amount of Each Receipt this Period  
500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

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

Mailing Address 9800 FREDERICKSBURG RD

City SAN ANTONIO State TX Zip Code 78288-0001

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11.12655**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**VERIZON WIRELESS GOOD GOVERNMENT CLUB**

Mailing Address 1300 I ST NW 4TH FLOOR

City WASHINGTON State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11.12748**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**VOICE FOR FREEDOM PAC**

Mailing Address 2700 CUMBERLAND PKWY  
STE 150

City ATLANTA State GA Zip Code 30339-3321

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11.12848**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 228
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>YOPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>11 / 03 / 2012</b>
Mailing Address <b>1101 WALNUT UNIT 1101</b>		<b>Transaction ID : SA11.12876</b>
City <b>KANSAS CITY</b>	State <b>MO</b> Zip Code <b>64106-4205</b>	
FEC ID number of contributing federal political committee. <b>C C00497305</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>87351.00</b>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 228
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11.12472**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. SAMUEL AMES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>9 OLD NECK RD</b>		Amount of Each Disbursement this Period <b>144.80</b> <b>Transaction ID : SB17.POST.20005</b>
City <b>MANCHESTER</b>	State <b>MA</b>	
Zip Code <b>01944</b>	Purpose of Disbursement <b>TRAVEL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OWEN BECKER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>1200.00</b> <b>Transaction ID : SB17.POST.20013</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>PAYROLL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OWEN BECKER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>1200.00</b> <b>Transaction ID : SB17.POST.20028</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>PAYROLL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2544.80</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. OWEN BECKER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 960.00 <b>Transaction ID : SB17.POST.20046</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHRISTIAN BERLE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1153.85 <b>Transaction ID : SB17.POST.20019</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRISTIAN BERLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1153.85 <b>Transaction ID : SB17.POST.20034</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3267.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CHRISTIAN BERLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 923.08 <b>Transaction ID : SB17.POST.20052</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANDREA CRUPI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 2333.33 <b>Transaction ID : SB17.POST.20021</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANDREA CRUPI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 2333.33 <b>Transaction ID : SB17.POST.20036</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5589.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANDREA CRUPI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1866.66 <b>Transaction ID : SB17.POST.20053</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JENNIFER DROGUS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.POST.20020</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JENNIFER DROGUS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.POST.20035</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7866.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PAUL FARRENKOPF</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>692.31</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	Zip Code <b>01940</b>
Purpose of Disbursement <b>PAYROLL</b>	Category/ Type	
Candidate Name	Transaction ID : <b>SB17.POST.20014</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAUL FARRENKOPF</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>692.31</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	Zip Code <b>01940</b>
Purpose of Disbursement <b>PAYROLL</b>	Category/ Type	
Candidate Name	Transaction ID : <b>SB17.POST.20029</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAUL FARRENKOPF</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 16 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>553.85</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	Zip Code <b>01940</b>
Purpose of Disbursement <b>PAYROLL</b>	Category/ Type	
Candidate Name	Transaction ID : <b>SB17.POST.20047</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1938.47</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANDREW FEDERICO</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012		
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 1292.31		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20017		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. ANDREW FEDERICO</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012		
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 1292.31		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20032		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. ANDREW FEDERICO</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012		
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 1033.85		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20050		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3618.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. RICHARD GOULD</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>			Amount of Each Disbursement this Period <b>1538.47</b> Transaction ID : <b>SB17.POST.20015</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	Zip Code <b>01940</b>	
Purpose of Disbursement <b>PAYROLL</b>		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <b>2012</b>			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. RICHARD GOULD</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>			Amount of Each Disbursement this Period <b>1538.47</b> Transaction ID : <b>SB17.POST.20030</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	Zip Code <b>01940</b>	
Purpose of Disbursement <b>PAYROLL</b>		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <b>2012</b>			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. RICHARD GOULD</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 07 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>			Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>SB17.POST.20039</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	Zip Code <b>01940</b>	
Purpose of Disbursement <b>PAYROLL</b>		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <b>2012</b>			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3476.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. RICHARD GOULD</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1230.78 <b>Transaction ID : SB17.POST.20048</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BRIAN HOOD</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1246.15 <b>Transaction ID : SB17.POST.20010</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BRIAN HOOD</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1246.15 <b>Transaction ID : SB17.POST.20025</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3723.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. BRIAN HOOD</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012	
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 996.92	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20043	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. ASHLEY KORB</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012	
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 2769.23	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20009	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. ASHLEY KORB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012	
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 2769.23	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20024	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6535.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. ASHLEY KORB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 2215.38 <b>Transaction ID : SB17.POST.20042</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHAD MADEIRA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 692.31 <b>Transaction ID : SB17.POST.20018</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHAD MADEIRA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 692.31 <b>Transaction ID : SB17.POST.20033</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CHAD MADEIRA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 553.85 <b>Transaction ID : SB17.POST.20051</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PHILIP MIATKOWSKI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.POST.20001</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PHILIP MIATKOWSKI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 22.00 <b>Transaction ID : SB17.POST.20004</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	587.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PHILIP MIATKOWSKI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>1246.15</b> Transaction ID : <b>SB17.POST.20012</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>PAYROLL</b>	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PHILIP MIATKOWSKI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>1246.15</b> Transaction ID : <b>SB17.POST.20027</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>PAYROLL</b>	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PHILIP MIATKOWSKI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 07 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>SB17.POST.20038</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>PAYROLL</b>	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2892.30</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PHILIP MIATKOWSKI</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012		
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 996.92		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20045		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. PAUL MOORE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012		
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 2256.99		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20003		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. PAUL MOORE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012		
Mailing Address 932 LYNNFIELD STREET			Amount of Each Disbursement this Period 3059.42		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20022		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6313.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PAUL MOORE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 3059.42
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name		Transaction ID : SB17.POST.20040
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. SEAN O'BRIEN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 864.00
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name		Transaction ID : SB17.POST.20016
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. SEAN O'BRIEN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 864.00
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name		Transaction ID : SB17.POST.20031
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4787.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. SEAN O'BRIEN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 691.20 <b>Transaction ID : SB17.POST.20049</b>
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DAVID PARKE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 127 ST. MARK'S PLACE APT 2		Amount of Each Disbursement this Period 2800.00 <b>Transaction ID : SB17.POST.20002</b>
City BROOKLYN	State NY	
Zip Code 11217	Purpose of Disbursement SECURITY SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DAVID PARKE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 127 ST. MARK'S PLACE APT 2		Amount of Each Disbursement this Period 4200.00 <b>Transaction ID : SB17.POST.20007</b>
City BROOKLYN	State NY	
Zip Code 11217	Purpose of Disbursement SECURITY SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7691.20
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. MATT ST. HILAIRE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 08 / 2012</b>
Mailing Address <b>27R WEST ST</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB17.POST.20008</b>
City <b>BEVERLY</b>	State <b>MA</b>	
Zip Code <b>01915</b>	Purpose of Disbursement <b>FIELD CONSULTING</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOSEPH WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>174 LOWELL STREET</b>		Amount of Each Disbursement this Period <b>26.75</b> <b>Transaction ID : SB17.POST.20006</b>
City <b>PEABODY</b>	State <b>MA</b>	
Zip Code <b>01960</b>	Purpose of Disbursement <b>TRAVEL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOSEPH WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>932 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB17.POST.20011</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>PAYROLL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2026.75</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. JOSEPH WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.POST.20026</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOSEPH WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 932 LYNNFIELD STREET		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.POST.20044</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. 1640 HART HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 51 LINEBROOK RD		Amount of Each Disbursement this Period 228.85 <b>Transaction ID : SB17.POST.20057</b>
City IPSWICH State MA Zip Code 01938	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2028.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. 99 RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>160 OLYMPIA AVE</b>		Amount of Each Disbursement this Period <b>131.70</b>
City <b>WOBURN</b>	State <b>MA</b>	
Zip Code <b>01801</b>	Purpose of Disbursement <b>MEETING EXPENSE</b>	<b>Transaction ID : SB17.POST.20058</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 99 RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>160 OLYMPIA AVE</b>		Amount of Each Disbursement this Period <b>122.47</b>
City <b>WOBURN</b>	State <b>MA</b>	
Zip Code <b>01801</b>	Purpose of Disbursement <b>MEETING EXPENSE</b>	<b>Transaction ID : SB17.POST.20059</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. 99 RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>160 OLYMPIA AVE</b>		Amount of Each Disbursement this Period <b>164.05</b>
City <b>WOBURN</b>	State <b>MA</b>	
Zip Code <b>01801</b>	Purpose of Disbursement <b>MEETING EXPENSE</b>	<b>Transaction ID : SB17.POST.20060</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>418.22</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. ADVANTAGE PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 126 MERROW RD  
PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement  
PAYROLL SERVICES/TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 18 / 2012

Amount of Each Disbursement this Period: 2126.47

Transaction ID : SB17.POST.20023

**B. ADVANTAGE PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 126 MERROW RD  
PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement  
PAYROLL SERVICES/TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2012

Amount of Each Disbursement this Period: 1852.32

Transaction ID : SB17.POST.20037

**C. ADVANTAGE PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 126 MERROW RD  
PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement  
PAYROLL SERVICES/TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 07 / 2012

Amount of Each Disbursement this Period: 357.89

Transaction ID : SB17.POST.20041

**SUBTOTAL** of Disbursements This Page (optional) ..... 4336.68

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. ADVANTAGE PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 126 MERROW RD  
PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement  
PAYROLL SERVICES/TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 16 / 2012

Amount of Each Disbursement this Period: 1240.70

Transaction ID : SB17.POST.20054

**B. ADVANTAGE PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 126 MERROW RD  
PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement  
VOIDED CHECK: PAYROLL (ORIGINAL DATE 9/6)

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2012

Amount of Each Disbursement this Period: -987.03

Transaction ID : SB17.POST.20055

**C. AIR CHARTER TEAM, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 4151 N MULBERRY DR  
STE 250

City KANSAS CITY State MO Zip Code 64116

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 2441.00

Transaction ID : SB17.POST.20056

**SUBTOTAL** of Disbursements This Page (optional) ..... 2694.67

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 0.17 <b>Transaction ID : SB17.POST.20061</b>
City MANHATTAN	State NY	
Zip Code 10080	Purpose of Disbursement BANK FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 0.59 <b>Transaction ID : SB17.POST.20062</b>
City MANHATTAN	State NY	
Zip Code 10080	Purpose of Disbursement BANK FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 35.00 <b>Transaction ID : SB17.POST.20063</b>
City MANHATTAN	State NY	
Zip Code 10080	Purpose of Disbursement BANK FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	35.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 151 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>108.25</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20232</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>60.30</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20233</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>161.17</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20234</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>329.72</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 228	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>176.27</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20235</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>43.65</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20236</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 26 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>5.36</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20237</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>225.28</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 153 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>239.64</b> <b>Transaction ID : SB17.POST.20238</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>201.33</b> <b>Transaction ID : SB17.POST.20239</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>146.40</b> <b>Transaction ID : SB17.POST.20240</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>587.37</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 154 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>3.76</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20241</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>3.76</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20242</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 02 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>81.55</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.POST.20243</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>89.07</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN EXPRESS - MERCHANT SERVICES**

Mailing Address **WORLD FINANCIAL CENTER  
200 VESEY ST.**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement **MERCHANT FEES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **15.35**

Transaction ID : **SB17.POST.20244**

Full Name (Last, First, Middle Initial)  
**B. AMERICAN EXPRESS - MERCHANT SERVICES**

Mailing Address **WORLD FINANCIAL CENTER  
200 VESEY ST.**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement **MERCHANT FEES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **94.15**

Transaction ID : **SB17.POST.20245**

Full Name (Last, First, Middle Initial)  
**C. AMERICAN EXPRESS - MERCHANT SERVICES**

Mailing Address **WORLD FINANCIAL CENTER  
200 VESEY ST.**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement **MERCHANT FEES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 06 / 2012**

Amount of Each Disbursement this Period: **115.93**

Transaction ID : **SB17.POST.20246**

**SUBTOTAL** of Disbursements This Page (optional) ..... **225.43**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 156 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 07 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>49.88</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		<b>Transaction ID : SB17.POST.20247</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 08 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>36.73</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		<b>Transaction ID : SB17.POST.20248</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS - MERCHANT SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 09 / 2012</b>
Mailing Address <b>WORLD FINANCIAL CENTER 200 VESEY ST.</b>		Amount of Each Disbursement this Period <b>3.76</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10285</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	
Candidate Name		<b>Transaction ID : SB17.POST.20249</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>90.37</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN EXPRESS - MERCHANT SERVICES**

Mailing Address **WORLD FINANCIAL CENTER  
200 VESEY ST.**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement **MERCHANT FEES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement **11 / 13 / 2012**

Amount of Each Disbursement this Period **1.60**

Transaction ID : **SB17.POST.20250**

Full Name (Last, First, Middle Initial)  
**B. AMERICAN EXPRESS - MERCHANT SERVICES**

Mailing Address **WORLD FINANCIAL CENTER  
200 VESEY ST.**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement **MERCHANT FEES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement **11 / 13 / 2012**

Amount of Each Disbursement this Period **3.04**

Transaction ID : **SB17.POST.20251**

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

Mailing Address **50 MASSACHUSETTS AVE NE**

City **WASHINGTON** State **DC** Zip Code **20002**

Purpose of Disbursement **TRAVEL:RAIL**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement **11 / 05 / 2012**

Amount of Each Disbursement this Period **160.00**

Transaction ID : **SB17.POST.20064**

**SUBTOTAL** of Disbursements This Page (optional) ..... **164.64**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMWAY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 28 / 2012</b>
Mailing Address <b>419 NEW JERSEY AVE SE</b>		Amount of Each Disbursement this Period <b>150.00</b> <b>Transaction ID : SB17.POST.20252</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>FACILITY RENTAL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANCIENT ORDER OF HIBERNIANS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 28 / 2012</b>
Mailing Address <b>ATTN: JOHN O'NEIL 105 FEDERAL ST</b>		Amount of Each Disbursement this Period <b>100.00</b> <b>Transaction ID : SB17.POST.20253</b>
City <b>LYNN</b>	State <b>MA</b>	
Zip Code <b>01905</b>	Purpose of Disbursement <b>FACILITY RENTAL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>208 SOUTH AKARD STREET</b>		Amount of Each Disbursement this Period <b>53.13</b> <b>Transaction ID : SB17.POST.20065</b>
City <b>DALLAS</b>	State <b>TX</b>	
Zip Code <b>75202</b>	Purpose of Disbursement <b>MOBILE PHONE EXPENSE</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>303.13</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 53.13 <b>Transaction ID : SB17.POST.20066</b>
City DALLAS State TX Zip Code 75202	Purpose of Disbursement MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AUTHORIZE.NET</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address PO BOX 8999		Amount of Each Disbursement this Period 5.70 <b>Transaction ID : SB17.POST.20254</b>
City SAN FRANCISCO State CA Zip Code 94128	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BABIES R US</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 300 ANDOVER STREET		Amount of Each Disbursement this Period 29.73 <b>Transaction ID : SB17.POST.20067</b>
City PEABODY State MA Zip Code 01960	Purpose of Disbursement DONOR SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	88.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. BACCI'S NORTH END PIZZERIA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 4A HOWARD STREET		Amount of Each Disbursement this Period 12.31 <b>Transaction ID : SB17.POST.20068</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement TRAVEL: FOOD	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BARNES AND NOBLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 122 FIFTH AVE		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.POST.20069</b>
City NEW YORK State NY Zip Code 10011	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BERTUCCI'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 15 NEWBURY STREET		Amount of Each Disbursement this Period 86.27 <b>Transaction ID : SB17.POST.20070</b>
City PEABODY State MA Zip Code 01960	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.58
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)

**A. BEST BUY**

Mailing Address 230 INDEPENDENCE WAY

City DANVERS State MA Zip Code 01923

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 58.43

Transaction ID : SB17.POST.20071

Full Name (Last, First, Middle Initial)

**B. BEST BUY**

Mailing Address 230 INDEPENDENCE WAY

City DANVERS State MA Zip Code 01923

Purpose of Disbursement OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 600.29

Transaction ID : SB17.POST.20072

Full Name (Last, First, Middle Initial)

**C. BLACK COW TAP AND GRILL**

Mailing Address 54 MERRIMAC STREET

City NEWBURYPORT State MA Zip Code 01950

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 241.09

Transaction ID : SB17.POST.20073

**SUBTOTAL** of Disbursements This Page (optional)..... 899.81

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. BOSTON PEABODY MARRIOTT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 8 CENTENNIAL DR		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.POST.20074</b>
City PEABODY	State MA	
Zip Code 01960	Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. BOSTON PEABODY MARRIOTT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 8 CENTENNIAL DR		Amount of Each Disbursement this Period 37.56 <b>Transaction ID : SB17.POST.20075</b>
City PEABODY	State MA	
Zip Code 01960	Purpose of Disbursement TRAVEL: FOOD	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CAFEPRESS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1850 GATEWAY DR STE 300		Amount of Each Disbursement this Period 239.00 <b>Transaction ID : SB17.POST.20076</b>
City SAN MATEO	State CA	
Zip Code 94404	Purpose of Disbursement MARKETING MATERIALS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1276.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 163 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAFEPRESS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>1850 GATEWAY DR STE 300</b>		Amount of Each Disbursement this Period <b>94.00</b>
City <b>SAN MATEO</b>	State <b>CA</b> Zip Code <b>94404</b>	
Purpose of Disbursement <b>MARKETING MATERIALS</b>	Category/Type	<b>Transaction ID : SB17.POST.20077</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CIRCLE K</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>448 SALEM STREET</b>		Amount of Each Disbursement this Period <b>74.21</b>
City <b>WAKEFIELD</b>	State <b>MA</b> Zip Code <b>01880</b>	
Purpose of Disbursement <b>TRAVEL:FUEL</b>	Category/Type	<b>Transaction ID : SB17.POST.20078</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>800.00</b>
City <b>FALLS CHURCH</b>	State <b>VA</b> Zip Code <b>22043</b>	
Purpose of Disbursement <b>DATA MANAGEMENT SERVICES</b>	Category/Type	<b>Transaction ID : SB17.POST.20079</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>968.21</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.POST.20080</b>
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATA MANAGEMENT SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. COMMUNITY CREDIT UNION OF LYNN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1 ANDREW STREET		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : SB17.POST.20255</b>
City LYNN	State MA	
Zip Code 01901	Purpose of Disbursement BANK FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. COMMUNITY CREDIT UNION OF LYNN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 1 ANDREW STREET		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : SB17.POST.20256</b>
City LYNN	State MA	
Zip Code 01901	Purpose of Disbursement BANK FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	880.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. COMMUNITY CREDIT UNION OF LYNN**

Mailing Address 1 ANDREW STREET

City LYNN State MA Zip Code 01901

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 25 / 2012

Amount of Each Disbursement this Period: 40.00

Transaction ID : SB17.POST.20257

Full Name (Last, First, Middle Initial)  
**B. COMMUNITY CREDIT UNION OF LYNN**

Mailing Address 1 ANDREW STREET

City LYNN State MA Zip Code 01901

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2012

Amount of Each Disbursement this Period: 40.00

Transaction ID : SB17.POST.20258

Full Name (Last, First, Middle Initial)  
**C. COMMUNITY CREDIT UNION OF LYNN**

Mailing Address 1 ANDREW STREET

City LYNN State MA Zip Code 01901

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2012

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.POST.20259

**SUBTOTAL** of Disbursements This Page (optional) ..... 95.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. COMMUNITY CREDIT UNION OF LYNN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1 ANDREW STREET		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : SB17.POST.20260</b>
City LYNN State MA Zip Code 01901	Purpose of Disbursement BANK FEE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COMMUNITY CREDIT UNION OF LYNN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 1 ANDREW STREET		Amount of Each Disbursement this Period 5.99 <b>Transaction ID : SB17.POST.20261</b>
City LYNN State MA Zip Code 01901	Purpose of Disbursement BANK FEE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COMMUNITY CREDIT UNION OF LYNN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 1 ANDREW STREET		Amount of Each Disbursement this Period 5.99 <b>Transaction ID : SB17.POST.20262</b>
City LYNN State MA Zip Code 01901	Purpose of Disbursement BANK FEE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 167 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. COMMUNITY CREDIT UNION OF LYNN**

Mailing Address 1 ANDREW STREET

City LYNN State MA Zip Code 01901

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2012

Amount of Each Disbursement this Period: 35.00

Transaction ID : SB17.POST.20263

Full Name (Last, First, Middle Initial)  
**B. COMMUNITY CREDIT UNION OF LYNN**

Mailing Address 1 ANDREW STREET

City LYNN State MA Zip Code 01901

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 16 / 2012

Amount of Each Disbursement this Period: 5.99

Transaction ID : SB17.POST.20264

Full Name (Last, First, Middle Initial)  
**C. COMMUNITY CREDIT UNION OF LYNN**

Mailing Address 1 ANDREW STREET

City LYNN State MA Zip Code 01901

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 16 / 2012

Amount of Each Disbursement this Period: 5.99

Transaction ID : SB17.POST.20265

**SUBTOTAL** of Disbursements This Page (optional) ..... 46.98

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 168 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CONNOLLY PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>17 GILL STREET</b>		Amount of Each Disbursement this Period <b>956.25</b> <b>Transaction ID : SB17.POST.20266</b>
City <b>WOBURN</b>	State <b>MA</b>	
Zip Code <b>01801</b>	Purpose of Disbursement <b>PRINTING &amp; DESIGN SERVICES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COSTCO WHOLESALE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>11 NEWBURY STREET</b>		Amount of Each Disbursement this Period <b>418.72</b> <b>Transaction ID : SB17.POST.20081</b>
City <b>DANVERS</b>	State <b>MA</b>	
Zip Code <b>01923</b>	Purpose of Disbursement <b>OFFICE SUPPLIES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CUMBERLAND FARMS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>72 TURNPIKE RD</b>		Amount of Each Disbursement this Period <b>73.00</b> <b>Transaction ID : SB17.POST.20082</b>
City <b>IPSWICH</b>	State <b>MA</b>	
Zip Code <b>01938</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1447.97</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. CVS PHARMACY</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		05		2012
M M	/	D D	/	Y Y Y Y								
11		05		2012								
Mailing Address <b>85 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <table border="1"> <tr> <td>16.07</td> </tr> </table>	16.07									
16.07												
City <b>PEABODY</b> State <b>MA</b> Zip Code <b>01960</b>	Transaction ID : <b>SB17.POST.20083</b>											
Purpose of Disbursement <b>OFFICE SUPPLIES</b>		Category/Type										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2012</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For: 2012	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For: 2012											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial) <b>B. CVS PHARMACY</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		05		2012
M M	/	D D	/	Y Y Y Y								
11		05		2012								
Mailing Address <b>85 LYNNFIELD STREET</b>		Amount of Each Disbursement this Period <table border="1"> <tr> <td>78.55</td> </tr> </table>	78.55									
78.55												
City <b>PEABODY</b> State <b>MA</b> Zip Code <b>01960</b>	Transaction ID : <b>SB17.POST.20084</b>											
Purpose of Disbursement <b>OFFICE SUPPLIES</b>		Category/Type										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2012</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For: 2012	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For: 2012											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial) <b>C. DUNKIN DONUTS</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		05		2012
M M	/	D D	/	Y Y Y Y								
11		05		2012								
Mailing Address <b>130 ROYALL STREET</b>		Amount of Each Disbursement this Period <table border="1"> <tr> <td>6.94</td> </tr> </table>	6.94									
6.94												
City <b>CANTON</b> State <b>MA</b> Zip Code <b>02021</b>	Transaction ID : <b>SB17.POST.20085</b>											
Purpose of Disbursement <b>TRAVEL: FOOD</b>		Category/Type										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2012</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For: 2012	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For: 2012											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	101.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. DUNKIN DONUTS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 130 ROYALL STREET		Amount of Each Disbursement this Period 39.02
City CANTON State MA Zip Code 02021	Purpose of Disbursement TRAVEL: FOOD	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20086
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DUNKIN DONUTS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 130 ROYALL STREET		Amount of Each Disbursement this Period 50.00
City CANTON State MA Zip Code 02021	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DUNKIN DONUTS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 130 ROYALL STREET		Amount of Each Disbursement this Period 20.00
City CANTON State MA Zip Code 02021	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20088
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	109.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 171 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. ELAVON MERCHANT SERVICES**

Mailing Address **ONE CONCOURSE PARKWAY  
SUITE 300**

City **ATLANTA** State **GA** Zip Code **30328**

Purpose of Disbursement **MERCHANT FEES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 02 / 2012**

Amount of Each Disbursement this Period: **3022.76**

Transaction ID : **SB17.POST.20267**

Category/Type

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

Mailing Address **333 108TH AVE NE**

City **BELLEVUE** State **WA** Zip Code **98004**

Purpose of Disbursement **TRAVEL:AIR**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **452.60**

Transaction ID : **SB17.POST.20089**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. EXPEDIA.COM**

Mailing Address **333 108TH AVE NE**

City **BELLEVUE** State **WA** Zip Code **98004**

Purpose of Disbursement **TRAVEL:AIR**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **452.60**

Transaction ID : **SB17.POST.20090**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... **3927.96**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 172 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. EXPEDIA.COM</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>333 108TH AVE NE</b>		Amount of Each Disbursement this Period <b>150.00</b> <b>Transaction ID : SB17.POST.20091</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004</b>	Purpose of Disbursement <b>TRAVEL:AIR</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EXPEDIA.COM</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>333 108TH AVE NE</b>		Amount of Each Disbursement this Period <b>452.60</b> <b>Transaction ID : SB17.POST.20092</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004</b>	Purpose of Disbursement <b>TRAVEL:AIR</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>11.68</b> <b>Transaction ID : SB17.POST.20093</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>614.28</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>40.89</b> <b>Transaction ID : SB17.POST.20094</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>52.02</b> <b>Transaction ID : SB17.POST.20095</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>36.50</b> <b>Transaction ID : SB17.POST.20096</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>129.41</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>40.49</b> <b>Transaction ID : SB17.POST.20097</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>45.75</b> <b>Transaction ID : SB17.POST.20098</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>50.00</b> <b>Transaction ID : SB17.POST.20099</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>136.24</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>55.00</b> <b>Transaction ID : SB17.POST.20100</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>30.00</b> <b>Transaction ID : SB17.POST.20101</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>5959 LAS COLINAS BLVD</b>		Amount of Each Disbursement this Period <b>50.00</b> <b>Transaction ID : SB17.POST.20102</b>
City <b>IRVING</b> State <b>TX</b> Zip Code <b>75039</b>	Purpose of Disbursement <b>TRAVEL:FUEL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>135.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 176 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

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

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement TRAVEL:FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 50.01

Transaction ID : SB17.POST.20103

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

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement TRAVEL:FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 50.03

Transaction ID : SB17.POST.20104

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

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement TRAVEL:FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 56.00

Transaction ID : SB17.POST.20105

**SUBTOTAL** of Disbursements This Page (optional) ..... 156.04

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 177 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 7.96
City IRVING State TX Zip Code 75039	Purpose of Disbursement TRAVEL:FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20106
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FAUCI PIZZA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 4 LYNNFIELD STREET		Amount of Each Disbursement this Period 24.74
City LYNN State MA Zip Code 01940	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20107
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period -1.17
City MEMPHIS State TN Zip Code 38116	Purpose of Disbursement CREDIT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20108
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 178 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. FEDEX</b>		M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period -5.18
City MEMPHIS	State TN Zip Code 38116	
Purpose of Disbursement CREDIT: DELIVERY SERVICES		<b>Transaction ID : SB17.POST.20109</b>
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. FEDEX</b>		M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period -3.94
City MEMPHIS	State TN Zip Code 38116	
Purpose of Disbursement CREDIT: DELIVERY SERVICES		<b>Transaction ID : SB17.POST.20110</b>
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. FEDEX</b>		M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period -3.94
City MEMPHIS	State TN Zip Code 38116	
Purpose of Disbursement CREDIT: DELIVERY SERVICES		<b>Transaction ID : SB17.POST.20111</b>
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-13.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 179 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. FEDEX</b>		M M / D D / Y Y Y Y 11 / 05 / 2012	
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period	
City MEMPHIS	State TN	Zip Code 38116	-3.74
Purpose of Disbursement CREDIT: DELIVERY SERVICES		Transaction ID : SB17.POST.20112	
Candidate Name		Category/ Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. FEDEX</b>		M M / D D / Y Y Y Y 11 / 05 / 2012	
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period	
City MEMPHIS	State TN	Zip Code 38116	-1.27
Purpose of Disbursement CREDIT: DELIVERY SERVICES		Transaction ID : SB17.POST.20113	
Candidate Name		Category/ Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. FEDEX</b>		M M / D D / Y Y Y Y 11 / 05 / 2012	
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period	
City MEMPHIS	State TN	Zip Code 38116	-13.10
Purpose of Disbursement CREDIT: DELIVERY SERVICES		Transaction ID : SB17.POST.20114	
Candidate Name		Category/ Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-18.11
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 180 OF 228  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 3875 AIRWAYS  
MODULE H3 DEPT 4634

City MEMPHIS State TN Zip Code 38116

Purpose of Disbursement CREDIT: DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: -0.14

Transaction ID : SB17.POST.20115

Category/Type

Full Name (Last, First, Middle Initial)

**B. FEDEX OFFICE**

Mailing Address 600 BROADWAY

City SAUGUS State MA Zip Code 01906

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 23.38

Transaction ID : SB17.POST.20116

Category/Type

Full Name (Last, First, Middle Initial)

**C. FEDEX OFFICE**

Mailing Address 600 BROADWAY

City SAUGUS State MA Zip Code 01906

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 103.59

Transaction ID : SB17.POST.20117

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 126.83

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. FEDEX OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 600 BROADWAY		Amount of Each Disbursement this Period 25.43
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement DELIVERY SERVICES	Category/Type	<b>Transaction ID : SB17.POST.20118</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEDEX OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 600 BROADWAY		Amount of Each Disbursement this Period 74.80
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement DELIVERY SERVICES	Category/Type	<b>Transaction ID : SB17.POST.20119</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEDEX OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 600 BROADWAY		Amount of Each Disbursement this Period 78.89
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement DELIVERY SERVICES	Category/Type	<b>Transaction ID : SB17.POST.20120</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	179.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 182 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. FEDEX OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 600 BROADWAY		Amount of Each Disbursement this Period 78.89
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement DELIVERY SERVICES	Category/Type	Transaction ID : SB17.POST.20121
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEDEX OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 600 BROADWAY		Amount of Each Disbursement this Period 2.87
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement DELIVERY SERVICES	Category/Type	Transaction ID : SB17.POST.20122
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEDEX OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 600 BROADWAY		Amount of Each Disbursement this Period 261.91
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement DELIVERY SERVICES	Category/Type	Transaction ID : SB17.POST.20123
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	343.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 183 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. FIREHOUSE SUBS**

Full Name (Last, First, Middle Initial)  
Mailing Address 35 INDEPENDENCE WAY

City DANVERS State MA Zip Code 01923

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 6.52

Transaction ID : SB17.POST.20124

**B. FLS CONNECT**

Full Name (Last, First, Middle Initial)  
Mailing Address 7300 HUDSON BLVD SUITE 270

City ST PAUL State MN Zip Code 55128

Purpose of Disbursement TELEMARKETING AND DATA MANAGEMENT SERVIC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 2502.39

Transaction ID : SB17.POST.20125

**C. FLS CONNECT**

Full Name (Last, First, Middle Initial)  
Mailing Address 7300 HUDSON BLVD SUITE 270

City ST PAUL State MN Zip Code 55128

Purpose of Disbursement TELEMARKETING AND DATA MANAGEMENT SERVIC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 1072.49

Transaction ID : SB17.POST.20126

**SUBTOTAL** of Disbursements This Page (optional) ..... 3581.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 184 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. FLS CONNECT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 7300 HUDSON BLVD SUITE 270		Amount of Each Disbursement this Period 1899.70
City ST PAUL State MN Zip Code 55128	Purpose of Disbursement TELEMARKETING AND DATA MANAGEMENT SERVIC	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20127</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. FLS CONNECT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 7300 HUDSON BLVD SUITE 270		Amount of Each Disbursement this Period 680.00
City ST PAUL State MN Zip Code 55128	Purpose of Disbursement TELEMARKETING AND DATA MANAGEMENT SERVIC	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20128</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. GAETA'S GULF</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 14 NEWBURY STREET		Amount of Each Disbursement this Period 30.00
City PEABODY State MA Zip Code 01960	Purpose of Disbursement TRAVEL:FUEL	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20129</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2609.70
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 185 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. GAETA'S GULF**

Mailing Address 14 NEWBURY STREET

City PEABODY State MA Zip Code 01960

Purpose of Disbursement TRAVEL:FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 50.01

Transaction ID : SB17.POST.20130

Full Name (Last, First, Middle Initial)  
**B. GAY & LESBIAN VICTORY FUND AND INSTITUTE**

Mailing Address 1133 15TH STREET NW SUITE 350

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2012

Amount of Each Disbursement this Period: 13.40

Transaction ID : SB17.POST.20268

Full Name (Last, First, Middle Initial)  
**C. GAY & LESBIAN VICTORY FUND AND INSTITUTE**

Mailing Address 1133 15TH STREET NW SUITE 350

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 6.99

Transaction ID : SB17.POST.20269

**SUBTOTAL** of Disbursements This Page (optional)..... 70.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 186 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. GLOBAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 137 NEWBURY STREET		Amount of Each Disbursement this Period 60.04
City PEABODY	State MA	
Zip Code 01960	Purpose of Disbursement TRAVEL:FUEL	Transaction ID : SB17.POST.20131
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE INC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 158.32
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement ONLINE ADVERTISING	Transaction ID : SB17.POST.20132
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GORDON FLORIST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 24 ESSEX RD		Amount of Each Disbursement this Period 45.19
City IPSWICH	State MA	
Zip Code 01938	Purpose of Disbursement DONOR SERVICES	Transaction ID : SB17.POST.20133
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	263.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 187 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. HANNAFORD SUPERMARKETS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 357 BROADWAY		Amount of Each Disbursement this Period 37.31
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20134</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HANNAFORD SUPERMARKETS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 357 BROADWAY		Amount of Each Disbursement this Period 123.75
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20135</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HANNAFORD SUPERMARKETS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 357 BROADWAY		Amount of Each Disbursement this Period 140.03
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20136</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	301.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 188 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. HARDCOVER RESTAURANT**

Mailing Address **15A NEWBURY STREET**

City **DANVERS** State **MA** Zip Code **01923**

Purpose of Disbursement  
**MEETING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**11 / 05 / 2012**

Amount of Each Disbursement this Period  
**100.00**

Transaction ID : **SB17.POST.20137**

Category/Type

Full Name (Last, First, Middle Initial)  
**B. HARVARD CLUB OF BOSTON**

Mailing Address **374 COMMONWEALTH AVE**

City **BOSTON** State **MA** Zip Code **02215**

Purpose of Disbursement  
**FACILITY RENTAL/CATERING SERVICES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**11 / 05 / 2012**

Amount of Each Disbursement this Period  
**800.00**

Transaction ID : **SB17.POST.20138**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. HARVARD CLUB OF BOSTON**

Mailing Address **374 COMMONWEALTH AVENUE**

City **BOSTON** State **MA** Zip Code **02215**

Purpose of Disbursement  
**FACILITY RENTAL/CATERING SERVICES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**11 / 05 / 2012**

Amount of Each Disbursement this Period  
**3117.98**

Transaction ID : **SB17.POST.20270**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... **4017.98**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. HESS EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1252 BROADWAY		Amount of Each Disbursement this Period 60.19
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement TRAVEL:FUEL	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20139</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IHOP RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 114 BROADWAY		Amount of Each Disbursement this Period 133.60
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20140</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IPARTY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 300 ANDOVER STREET		Amount of Each Disbursement this Period 79.66
City PEABODY State MA Zip Code 01960	Purpose of Disbursement EVENT ENTERTAINMENT	
Candidate Name	Category/Type	<b>Transaction ID : SB17.POST.20141</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	273.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LATITUDE 43</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>25 ROGERS STREET</b>		Amount of Each Disbursement this Period <b>339.65</b>
City <b>GLOUCESTER</b>	State <b>MA</b>	
Zip Code <b>01930</b>	Purpose of Disbursement <b>MEETING EXPENSE</b>	<b>Transaction ID : SB17.POST.20142</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LIBERTY STRATEGIES AND DEVELOPMENT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2012</b>
Mailing Address <b>35 OAK STREET</b>		Amount of Each Disbursement this Period <b>-2500.00</b>
City <b>MANCHESTER</b>	State <b>NH</b>	
Zip Code <b>03104</b>	Purpose of Disbursement <b>VOIDED CHECK: STRATEGY CONSULTING (ORIGI</b>	<b>Transaction ID : SB17.POST.20271</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>445 BROADWAY RT 1 N</b>		Amount of Each Disbursement this Period <b>7.38</b>
City <b>LYNNFIELD</b>	State <b>MA</b>	
Zip Code <b>01940</b>	Purpose of Disbursement <b>TRAVEL: FOOD</b>	<b>Transaction ID : SB17.POST.20143</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>-2152.97</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 14.77
City LYNNFIELD State MA Zip Code 01940	Category/Type	
Purpose of Disbursement TRAVEL: FOOD	Candidate Name	Transaction ID : SB17.POST.20144
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 15.83
City LYNNFIELD State MA Zip Code 01940	Category/Type	
Purpose of Disbursement TRAVEL: FOOD	Candidate Name	Transaction ID : SB17.POST.20145
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 14.77
City LYNNFIELD State MA Zip Code 01940	Category/Type	
Purpose of Disbursement TRAVEL: FOOD	Candidate Name	Transaction ID : SB17.POST.20146
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 7.38
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement TRAVEL: FOOD	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20147
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 11.06
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement TRAVEL: FOOD	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20148
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 72.98
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20149
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	91.42
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 193 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYNNFIELD MEAT AND DELI</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012	
Mailing Address 445 BROADWAY RT 1 N			Amount of Each Disbursement this Period 35.91	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20150	
Purpose of Disbursement MEETING EXPENSE		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. LYNNFIELD MEAT AND DELI</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012	
Mailing Address 445 BROADWAY RT 1 N			Amount of Each Disbursement this Period 88.68	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20151	
Purpose of Disbursement MEETING EXPENSE		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. LYNNFIELD MEAT AND DELI</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012	
Mailing Address 445 BROADWAY RT 1 N			Amount of Each Disbursement this Period 29.54	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.POST.20152	
Purpose of Disbursement MEETING EXPENSE		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	154.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 109.21
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement MEETING EXPENSE Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Transaction ID : SB17.POST.20153

Full Name (Last, First, Middle Initial) <b>B. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 22.15
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement MEETING EXPENSE Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Transaction ID : SB17.POST.20154

Full Name (Last, First, Middle Initial) <b>C. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 42.62
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement MEETING EXPENSE Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Transaction ID : SB17.POST.20155

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	173.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 195 OF 228	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 7.38
City LYNNFIELD	State MA Zip Code 01940	
Purpose of Disbursement TRAVEL: FOOD	Category/Type	<b>Transaction ID : SB17.POST.20156</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 64.97
City LYNNFIELD	State MA Zip Code 01940	
Purpose of Disbursement MEETING EXPENSE	Category/Type	<b>Transaction ID : SB17.POST.20157</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LYNNFIELD MEAT AND DELI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 445 BROADWAY RT 1 N		Amount of Each Disbursement this Period 25.22
City LYNNFIELD	State MA Zip Code 01940	
Purpose of Disbursement MEETING EXPENSE	Category/Type	<b>Transaction ID : SB17.POST.20158</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	97.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 196 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)

**A. MARKET BASKET**

Mailing Address 139 ENDICOTT STREET

City DANVERS State MA Zip Code 01923

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 66.70

Transaction ID : SB17.POST.20159

Full Name (Last, First, Middle Initial)

**B. MARKET BASKET**

Mailing Address 139 ENDICOTT STREET

City DANVERS State MA Zip Code 01923

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 76.07

Transaction ID : SB17.POST.20160

Full Name (Last, First, Middle Initial)

**C. MASSACHUSETTS PORT AUTHORITY**

Mailing Address 1 HARBORSIDE DR #200F

City BOSTON State MA Zip Code 02128

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 27.00

Transaction ID : SB17.POST.20161

**SUBTOTAL** of Disbursements This Page (optional) ..... 169.77

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 197 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. MCLAUGHLIN &amp; ASSOCIATES, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>566 SOUTH ROUTE 303</b>		Amount of Each Disbursement this Period <b>9795.00</b>
City <b>BLAUVELT</b> State <b>NY</b> Zip Code <b>10913</b>	Purpose of Disbursement <b>STRATEGY CONSULTING</b>	
Candidate Name		<b>Transaction ID : SB17.POST.20272</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. MCLAY'S FLORIST</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>1211 OSGOOD STREET</b>		Amount of Each Disbursement this Period <b>45.19</b>
City <b>NORTH ANDOVER</b> State <b>MA</b> Zip Code <b>01845</b>	Purpose of Disbursement <b>DONOR SERVICES</b>	
Candidate Name		<b>Transaction ID : SB17.POST.20162</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL GRID</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>PO BOX 11735</b>		Amount of Each Disbursement this Period <b>45.65</b>
City <b>NEWARK</b> State <b>NJ</b> Zip Code <b>07101</b>	Purpose of Disbursement <b>UTILITIES</b>	
Candidate Name		<b>Transaction ID : SB17.POST.20273</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>9885.84</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 198 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. NORTH OF BOSTON MEDIA GROUP**

Mailing Address 32 DUNHAM RD

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement PLACED MEDIA

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 3700.00

Transaction ID : SB17.POST.20274

Full Name (Last, First, Middle Initial)  
**B. OLD TOWNE MARKET**

Mailing Address 8 POST OFFICE SQUARE

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 21.43

Transaction ID : SB17.POST.20163

Full Name (Last, First, Middle Initial)  
**C. OLD TOWNE MARKET**

Mailing Address 8 POST OFFICE SQUARE

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 26.97

Transaction ID : SB17.POST.20164

**SUBTOTAL** of Disbursements This Page (optional) ..... 3748.40

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. OM PROMOTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address PO BOX 1725		Amount of Each Disbursement this Period 419.00
City WAKEFIELD	State MA	
Zip Code 01880	Purpose of Disbursement MARKETING MATERIALS	Transaction ID : SB17.POST.20275
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PARKER FLORIST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 9 LINCOLN STREET		Amount of Each Disbursement this Period 91.00
City WAKEFIELD	State MA	
Zip Code 01880	Purpose of Disbursement EVENT STAGING EXPENSE	Transaction ID : SB17.POST.20165
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PARKER FLORIST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 9 LINCOLN STREET		Amount of Each Disbursement this Period 143.81
City WAKEFIELD	State MA	
Zip Code 01880	Purpose of Disbursement EVENT STAGING EXPENSE	Transaction ID : SB17.POST.20166
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	653.81
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 228	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PATCH MEDIA GROUP</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206		Amount of Each Disbursement this Period ----- -73.34
City NEW YORK State NY Zip Code 10012	Purpose of Disbursement CREDIT: PLACED MEDIA	
Candidate Name		Transaction ID : SB17.POST.20167
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. PATCH MEDIA GROUP</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206		Amount of Each Disbursement this Period ----- 366.66
City NEW YORK State NY Zip Code 10012	Purpose of Disbursement PLACED MEDIA	
Candidate Name		Transaction ID : SB17.POST.20168
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. PATCH MEDIA GROUP</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206		Amount of Each Disbursement this Period ----- 366.67
City NEW YORK State NY Zip Code 10012	Purpose of Disbursement PLACED MEDIA	
Candidate Name		Transaction ID : SB17.POST.20169
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	----- 659.99
<b>TOTAL</b> This Period (last page this line number only) .....	-----



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 228			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PATCH MEDIA GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206		Amount of Each Disbursement this Period 366.66 <b>Transaction ID : SB17.POST.20170</b>
City NEW YORK State NY Zip Code 10012	Purpose of Disbursement PLACED MEDIA Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. PATCH MEDIA GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206		Amount of Each Disbursement this Period 264.00 <b>Transaction ID : SB17.POST.20171</b>
City NEW YORK State NY Zip Code 10012	Purpose of Disbursement PLACED MEDIA Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. PATCH MEDIA GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : SB17.POST.20172</b>
City NEW YORK State NY Zip Code 10012	Purpose of Disbursement PLACED MEDIA Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	750.66
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 202 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. PATCH MEDIA GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 584 BROADWAY ROOM 1206			Amount of Each Disbursement this Period 315.00 <b>Transaction ID : SB17.POST.20173</b>
City NEW YORK	State NY	Zip Code 10012	
Purpose of Disbursement PLACED MEDIA		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PETRILLO'S RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 6 FOSTER STREET			Amount of Each Disbursement this Period 27.29 <b>Transaction ID : SB17.POST.20174</b>
City PEABODY	State MA	Zip Code 01960	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PETTY CASH - BRIAN CRESTA</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 932 LYNNFIELD ST			Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.POST.20276</b>
City LYNNFIELD	State MA	Zip Code 01940	
Purpose of Disbursement PETTY CASH		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	642.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 203 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. PETTY CASH - BRIAN CRESTA**

Full Name (Last, First, Middle Initial)  
Mailing Address 932 LYNNFIELD ST

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement  
PETTY CASH

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 05 / 2012

Amount of Each Disbursement this Period  
400.00

Transaction ID : SB17.POST.20277

Category/Type

**B. RADIO SHACK**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 INDEPENDENCE WAY  
STE 42

City DANVERS State MA Zip Code 01923

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 05 / 2012

Amount of Each Disbursement this Period  
116.84

Transaction ID : SB17.POST.20175

Category/Type

**C. RED CURVE SOLUTIONS**

Full Name (Last, First, Middle Initial)  
Mailing Address 138 CONANT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 31 / 2012

Amount of Each Disbursement this Period  
2401.55

Transaction ID : SB17.POST.20278

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 2918.39

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 204 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 2400.00
City BEVERLY	State MA	
Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.POST.20279
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RED ROCK BISTRO AND BAR</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 141 HUMPHRY STREET		Amount of Each Disbursement this Period 53.94
City SWAMPSCOTT	State MA	
Zip Code 01907	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20176
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RED ROCK BISTRO AND BAR</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 141 HUMPHRY STREET		Amount of Each Disbursement this Period 84.23
City SWAMPSCOTT	State MA	
Zip Code 01907	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20177
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2538.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. RED'S KITCHEN AND TAVERN</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>129 NEWBURY STREET</b>			Amount of Each Disbursement this Period <b>22.40</b>
City <b>PEABODY</b>	State <b>MA</b>	Zip Code <b>01960</b>	
Purpose of Disbursement <b>MEETING EXPENSE</b>		Category/ Type	<b>Transaction ID : SB17.POST.20178</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. REVOLUTION AGENCY</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>1020 PRINCESS ST</b>			Amount of Each Disbursement this Period <b>227200.00</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	
Purpose of Disbursement <b>PLACED MEDIA</b>		Category/ Type	<b>Transaction ID : SB17.POST.20280</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. REVOLUTION AGENCY</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>1020 PRINCESS ST</b>			Amount of Each Disbursement this Period <b>10000.00</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	
Purpose of Disbursement <b>PLACED MEDIA</b>		Category/ Type	<b>Transaction ID : SB17.POST.20281</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>237222.40</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. REVOLUTION AGENCY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 26 / 2012</b>
Mailing Address <b>1020 PRINCESS ST</b>		Amount of Each Disbursement this Period <b>109890.00</b> <b>Transaction ID : SB17.POST.20282</b>
City <b>ALEXANDRIA</b> State <b>VA</b> Zip Code <b>22314</b>	Purpose of Disbursement <b>PLACED MEDIA</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REVOLUTION AGENCY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>1020 PRINCESS ST</b>		Amount of Each Disbursement this Period <b>99800.00</b> <b>Transaction ID : SB17.POST.20283</b>
City <b>ALEXANDRIA</b> State <b>VA</b> Zip Code <b>22314</b>	Purpose of Disbursement <b>PLACED MEDIA</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REVOLUTION AGENCY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>1020 PRINCESS ST</b>		Amount of Each Disbursement this Period <b>15000.00</b> <b>Transaction ID : SB17.POST.20284</b>
City <b>ALEXANDRIA</b> State <b>VA</b> Zip Code <b>22314</b>	Purpose of Disbursement <b>PLACED MEDIA</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>224690.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 207 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. RISTORANTE MOLISE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 466 MAIN STREET		Amount of Each Disbursement this Period 115.23
City WAKEFIELD	State MA	
Zip Code 01880	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20179
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RITE AID</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 359 BROADWAY		Amount of Each Disbursement this Period 5.83
City SAUGUS	State MA	
Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.POST.20180
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ROCCO'S RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 193 MAIN STREET		Amount of Each Disbursement this Period 75.21
City WILMINGTON	State MA	
Zip Code 01887	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20181
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	196.27
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 208 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. RT 1 AUTO SERVICE**

Mailing Address **218 NEWBURY STREET**

City **PEABODY** State **MA** Zip Code **01960**

Purpose of Disbursement  
**TRAVEL:FUEL**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **25.00**

Transaction ID : **SB17.POST.20182**

Category/Type

Full Name (Last, First, Middle Initial)  
**B. SABATINO'S RESTAURANT**

Mailing Address **330 MAIN STREET**

City **WAKEFIELD** State **MA** Zip Code **01880**

Purpose of Disbursement  
**MEETING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **210.40**

Transaction ID : **SB17.POST.20183**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. SABATINO'S RESTAURANT**

Mailing Address **330 MAIN STREET**

City **WAKEFIELD** State **MA** Zip Code **01880**

Purpose of Disbursement  
**MEETING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: **11 / 05 / 2012**

Amount of Each Disbursement this Period: **69.20**

Transaction ID : **SB17.POST.20184**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... **304.60**

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 209 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. SAL'S PIZZA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 139 LYNNFIELD STREET		Amount of Each Disbursement this Period 42.77
City PEABODY	State MA	
Zip Code 01960	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20185
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SAL'S PIZZA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 139 LYNNFIELD STREET		Amount of Each Disbursement this Period 31.54
City PEABODY	State MA	
Zip Code 01960	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20186
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SANTARPIO'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 71 NEWBURY STREET		Amount of Each Disbursement this Period 21.12
City PEABODY	State MA	
Zip Code 01960	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.POST.20187
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	95.43
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. SHAWS SUPERMARKET</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 114-128 ESSEX CENTER DR			Amount of Each Disbursement this Period 115.80 <b>Transaction ID : SB17.POST.20188</b>
City PEABODY	State MA	Zip Code 01960	
Purpose of Disbursement MEETING EXPENSE		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. SHAWS SUPERMARKET</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 114-128 ESSEX CENTER DR			Amount of Each Disbursement this Period 113.18 <b>Transaction ID : SB17.POST.20189</b>
City PEABODY	State MA	Zip Code 01960	
Purpose of Disbursement MEETING EXPENSE		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. SHELL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 14 NEWBURY STREET			Amount of Each Disbursement this Period 65.38 <b>Transaction ID : SB17.POST.20190</b>
City PEABODY	State MA	Zip Code 01960	
Purpose of Disbursement TRAVEL:FUEL		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	294.38
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 211 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. SHERATON COLONIAL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>1 AUDUBON RD</b>		Amount of Each Disbursement this Period <b>2593.62</b> <b>Transaction ID : SB17.POST.20191</b>
City <b>WAKEFIELD</b>	State <b>MA</b>	
Zip Code <b>01880</b>	Purpose of Disbursement <b>FACILITY RENTAL/CATERING SERVICES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHERATON COLONIAL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>1 AUDUBON RD</b>		Amount of Each Disbursement this Period <b>71.72</b> <b>Transaction ID : SB17.POST.20192</b>
City <b>WAKEFIELD</b>	State <b>MA</b>	
Zip Code <b>01880</b>	Purpose of Disbursement <b>FACILITY RENTAL/CATERING SERVICES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SIMONIZ CAR WASH</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>374 MAIN STREET</b>		Amount of Each Disbursement this Period <b>29.99</b> <b>Transaction ID : SB17.POST.20193</b>
City <b>READING</b>	State <b>MA</b>	
Zip Code <b>01867</b>	Purpose of Disbursement <b>TRAVEL:OTHER</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2695.33</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 212 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. ST. MICHAEL'S SOCIETY</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>	
Mailing Address <b>15 ENDICOTT ST</b>			Amount of Each Disbursement this Period <b>200.00</b>	
City <b>PEABODY</b>	State <b>MA</b>	Zip Code <b>01960</b>	Transaction ID : <b>SB17.POST.20285</b>	
Purpose of Disbursement <b>FACILITY RENTAL</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>	
Mailing Address <b>444 BROADWAY</b>			Amount of Each Disbursement this Period <b>158.26</b>	
City <b>SAUGUS</b>	State <b>MA</b>	Zip Code <b>01906</b>	Transaction ID : <b>SB17.POST.20194</b>	
Purpose of Disbursement <b>OFFICE SUPPLIES</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>	
Mailing Address <b>444 BROADWAY</b>			Amount of Each Disbursement this Period <b>120.01</b>	
City <b>SAUGUS</b>	State <b>MA</b>	Zip Code <b>01906</b>	Transaction ID : <b>SB17.POST.20195</b>	
Purpose of Disbursement <b>OFFICE SUPPLIES</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>478.27</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 233.51 <b>Transaction ID : SB17.POST.20196</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 118.45 <b>Transaction ID : SB17.POST.20197</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 149.02 <b>Transaction ID : SB17.POST.20198</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	509.98
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 219.13 <b>Transaction ID : SB17.POST.20199</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 242.07 <b>Transaction ID : SB17.POST.20200</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 271.13 <b>Transaction ID : SB17.POST.20201</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	732.33
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 215 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial)  
**A. STELIO'S FAMILY RESTAURANT**

Mailing Address 293 BOSTON RD

City NORTH BILLERICA State MA Zip Code 01862

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 50.00

Transaction ID : SB17.POST.20202

Full Name (Last, First, Middle Initial)  
**B. STOP AND SHOP**

Mailing Address 19 HOWLEY STREET

City PEABODY State MA Zip Code 01960

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 245.33

Transaction ID : SB17.POST.20203

Full Name (Last, First, Middle Initial)  
**C. SUNOCO**

Mailing Address 493 SALEM STREET

City WAKEFIELD State MA Zip Code 01880

Purpose of Disbursement TRAVEL:FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 77.83

Transaction ID : SB17.POST.20204

**SUBTOTAL** of Disbursements This Page (optional) ..... 373.16

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. SWIFTCURRENT STRATEGIES**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 5

City SALEM State MA Zip Code 01970

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 08 / 2012

Amount of Each Disbursement this Period: 8070.00

Transaction ID : SB17.POST.20286

**B. SYLVAN STREET GRILLE**

Full Name (Last, First, Middle Initial)  
Mailing Address 12 SYLVAN STREET

City PEABODY State MA Zip Code 01960

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 269.33

Transaction ID : SB17.POST.20205

**C. THE BOSTON PEABODY MARRIOTT**

Full Name (Last, First, Middle Initial)  
Mailing Address 8 CENTENNIAL DRIVE

City PEABODY State MA Zip Code 01960

Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 09 / 2012

Amount of Each Disbursement this Period: 15149.23

Transaction ID : SB17.POST.20287

**SUBTOTAL** of Disbursements This Page (optional) ..... 23488.56

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE HOME DEPOT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 235 INDEPENDENCE WAY			Amount of Each Disbursement this Period 49.89
City DANVERS	State MA	Zip Code 01923	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name		Transaction ID : SB17.POST.20206
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. THE HOME DEPOT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 235 INDEPENDENCE WAY			Amount of Each Disbursement this Period 39.79
City DANVERS	State MA	Zip Code 01923	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name		Transaction ID : SB17.POST.20207
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>C. THE HOME DEPOT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 235 INDEPENDENCE WAY			Amount of Each Disbursement this Period 17.89
City DANVERS	State MA	Zip Code 01923	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name		Transaction ID : SB17.POST.20208
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	107.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 218 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 235 INDEPENDENCE WAY		Amount of Each Disbursement this Period 69.62
City DANVERS State MA Zip Code 01923	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20209
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 235 INDEPENDENCE WAY		Amount of Each Disbursement this Period 82.91
City DANVERS State MA Zip Code 01923	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20210
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 235 INDEPENDENCE WAY		Amount of Each Disbursement this Period 251.88
City DANVERS State MA Zip Code 01923	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20211
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	404.41
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE JEWISH JOURNAL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 28 / 2012</b>
Mailing Address <b>27 CONGRESS STREET SUITE 501</b>		Amount of Each Disbursement this Period <b>884.00</b> <b>Transaction ID : SB17.POST.20288</b>
City <b>SALEM</b> State <b>MA</b> Zip Code <b>01970</b>	Purpose of Disbursement <b>PLACED MEDIA</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE NEW YORK TIMES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>620 8TH AVE</b>		Amount of Each Disbursement this Period <b>61.60</b> <b>Transaction ID : SB17.POST.20212</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10018</b>	Purpose of Disbursement <b>ONLINE SUBSCRIPTIONS</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THRIFTCO PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address <b>26 HOWLEY STREET</b>		Amount of Each Disbursement this Period <b>14838.88</b> <b>Transaction ID : SB17.POST.20289</b>
City <b>PEABODY</b> State <b>MA</b> Zip Code <b>01960</b>	Purpose of Disbursement <b>MARKETING MATERIALS</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>15784.48</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 220 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. THRIFTCO PRINTING**

Full Name (Last, First, Middle Initial)  
Mailing Address 26 HOWLEY STREET

City PEABODY State MA Zip Code 01960

Purpose of Disbursement  
MARKETING MATERIALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 08 / 2012

Amount of Each Disbursement this Period  
2357.32

Transaction ID : SB17.POST.20290

**B. US POST OFFICE**

Full Name (Last, First, Middle Initial)  
Mailing Address 598 SALEM STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 05 / 2012

Amount of Each Disbursement this Period  
180.00

Transaction ID : SB17.POST.20213

**C. US POST OFFICE**

Full Name (Last, First, Middle Initial)  
Mailing Address 598 SALEM STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 05 / 2012

Amount of Each Disbursement this Period  
11.35

Transaction ID : SB17.POST.20214

**SUBTOTAL** of Disbursements This Page (optional)..... 2548.67

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 228			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. US POST OFFICE**

Full Name (Last, First, Middle Initial)

Mailing Address 598 SALEM STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 135.00

Transaction ID : SB17.POST.20215

**B. US POST OFFICE**

Full Name (Last, First, Middle Initial)

Mailing Address 598 SALEM STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 188.05

Transaction ID : SB17.POST.20216

**C. US POST OFFICE**

Full Name (Last, First, Middle Initial)

Mailing Address 598 SALEM STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 270.00

Transaction ID : SB17.POST.20217

**SUBTOTAL** of Disbursements This Page (optional)..... 593.05

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 222 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 598 SALEM STREET		Amount of Each Disbursement this Period 315.00 <b>Transaction ID : SB17.POST.20218</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERC ENTERPRISES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 8 BROADWAY		Amount of Each Disbursement this Period 44.35 <b>Transaction ID : SB17.POST.20219</b>
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement TRAVEL:FUEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WALGREENS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1228 BROADWAY		Amount of Each Disbursement this Period 26.24 <b>Transaction ID : SB17.POST.20220</b>
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	385.59
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 223 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. WALGREENS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1228 BROADWAY		Amount of Each Disbursement this Period 4.77
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20221
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WALMART</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 55 BROOKSBY VILLAGE DR		Amount of Each Disbursement this Period 118.12
City DANVERS State MA Zip Code 01923	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20222
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WELCH FLORIST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 121 ESSEX STREET		Amount of Each Disbursement this Period 46.14
City LYNN State MA Zip Code 01902	Purpose of Disbursement DONOR SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.POST.20223
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	169.03
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 224 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. WIDGETMAKR</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>848.50</b> <b>Transaction ID : SB17.POST.20224</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WIDGETMAKR</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>169.95</b> <b>Transaction ID : SB17.POST.20225</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WIDGETMAKR</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>398.50</b> <b>Transaction ID : SB17.POST.20226</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1416.95</b>
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 228			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. WIDGETMAKR**

Full Name (Last, First, Middle Initial)

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 99.00

Transaction ID : SB17.POST.20227

**B. WIDGETMAKR**

Full Name (Last, First, Middle Initial)

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 699.25

Transaction ID : SB17.POST.20228

**C. WIDGETMAKR**

Full Name (Last, First, Middle Initial)

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 184.13

Transaction ID : SB17.POST.20229

**SUBTOTAL** of Disbursements This Page (optional) ..... 982.38

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 226 OF 228	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

**A. WINTHROP SQUARE PARKING GARAGE**

Full Name (Last, First, Middle Initial)  
Mailing Address 240 DEVONSHIRE SST

City BOSTON State MA Zip Code 02110

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 7.00

Transaction ID : SB17.POST.20230

**B. YANKEE CANDLE CO**

Full Name (Last, First, Middle Initial)  
Mailing Address 24 BROADWAY

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement DONOR SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 23.36

Transaction ID : SB17.POST.20231

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... 30.36

**TOTAL** This Period (last page this line number only) ..... 634840.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 228			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANTONIO FRIAS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>
Mailing Address <b>20 CEDAR STREET</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>HUDSON</b>	State <b>MA</b>	Zip Code <b>01749</b>
Purpose of Disbursement <b>CONTRIBUTION REFUND</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB20.POST.10001</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STEPHEN MARCUS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 20 / 2012</b>
Mailing Address <b>2 POUT ROCK RD.</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>NORTH EASTON</b>	State <b>MA</b>	Zip Code <b>02356</b>
Purpose of Disbursement <b>CONTRIBUTION REFUND</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB20.POST.10003</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THOMAS THOMPSON</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 20 / 2012</b>
Mailing Address <b>18 BAYVIEW AVE.</b>		Amount of Each Disbursement this Period <b>1100.00</b>
City <b>BEVERLY</b>	State <b>MA</b>	Zip Code <b>01915</b>
Purpose of Disbursement <b>CONTRIBUTION REFUND</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB20.POST.10004</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2100.00</b>

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 228 OF 228	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tisei for Congress**

Full Name (Last, First, Middle Initial) <b>A. FREE MARKETS PAC, INC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2012</b>
Mailing Address <b>PO BOX 470848</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB20.POST.10002</b>
City <b>CHARLOTTE</b>	State <b>NC</b> Zip Code <b>28247</b>	
Purpose of Disbursement <b>CONTRIBUTION REFUND</b>	Candidate Name  Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name  Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name  Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1000.00</b>