

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation USACTION		3. FEC Identification Number C C90012089
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1825 K ST. NW SUITE 210		
(c) City, State and ZIP Code WASHINGTON DC 20006		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☐ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☒ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
1	1

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
1	2

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

65397.82

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Eboni Speight

01/31/2011

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Amazon

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

City

State

Zip Code

501.93

Purpose of Expenditure
iPod Accessories for CanvassCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

36567.05

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Amtrak

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

City

State

Zip Code

311.00

Purpose of Expenditure
Field TravelCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

16941.90

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Apple

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

City

State

Zip Code

5994.00

Purpose of Expenditure
iPods for CanvassersCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

42561.05

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

6806.93

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 11930286559
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Samuel Balikov

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
304 Evergreen Dr.

Amount

50.00

City State Zip Code
Moorestown NJ 08057

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 8559.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Kaitlin Bangert

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
110 South Ambler St.

Amount

245.00

City State Zip Code
Quakertown PA 18951

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 5419.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
William Barker

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
50 Hawthorne Lane

Amount

360.00

City State Zip Code
Levittown PA 19055

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 11105.47

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

655.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE **4 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Trisha Barnes-Wilson

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
210 Marision Rd.

Amount

219.48

City
DunbartonState
NHZip Code
03046Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

10201.54

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Brenda Barron

Date

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

Mailing Address
1825 K St. NW
Suite 210

Amount

1527.22

City
WashingtonState
DCZip Code
20006Purpose of Expenditure
Reimbursements for travel, gas, food and cell phone usageCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

15632.17

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
James Bennett

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
1 Magnolia Park Lane

Amount

150.00

City
LevittownState
PAZip Code
19054Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

4689.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1896.70

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Hugh Birchall

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

5929 Emilie Rd.

Amount

500.00

City

Levittown

State

PA

Zip Code

19056

Purpose of Expenditure

Canvasser payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

4539.04

Disbursement For:

2010

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Jeff Blum

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address

1825 K St. NW
Suite 210

Amount

52.25

City

Washington

State

DC

Zip Code

20006

Purpose of Expenditure

Travel Reimbursement

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

12981.07

Disbursement For:

2010

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Jeff Blum

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address

1825 K St. NW
Suite 210

Amount

1022.25

City

Washington

State

DC

Zip Code

20006

Purpose of Expenditure

Travel Reimbursement

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

☐

President

District: 01

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

32517.37

Disbursement For:

2010

☐

Primary

☒

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1574.50

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Bethanne Boggs

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

40 Sunrise Ct.

Amount

100.00

City

Holland

State

PA

Zip Code

18966

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

932.50

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Vincent Bradley

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

90 East Boradway, Apt 2

Amount

1170.81

City

Derry

State

NH

Zip Code

03038

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

☐

President

District: 01

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

30056.99

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Antonio Brailey

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

32 Ivy Hill Rd.

Amount

200.00

City

Levittown

State

PA

Zip Code

19057

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

682.50

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1470.81

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 11930286563
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Holly Brennan

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
53 Parkside Circle

Amount

100.00

City State Zip Code
Levittown PA 19056

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 3589.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Michael Brennan

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
506 Nel Drive

Amount

450.00

City State Zip Code
Fairless Hills PA 19030

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 7959.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Suraj Budathoki

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
394 Rimaron St.

Amount

518.61

City State Zip Code
Manchester NH 03102

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTER

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 28886.18

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

1068.61

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE **8 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Elizabeth Burdette

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

82 Nightingale Lane

Amount

200.00

City

Levittown

State

PA

Zip Code

19054

Purpose of Expenditure

canvasser payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

3489.04

Disbursement For:

2010

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Andrew Butler

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

PO Box 11727

Amount

132.50

City

Philadelphia

State

PA

Zip Code

19101

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

332.50

Disbursement For:

2010

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Andrew Capen

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

22 Douglas Drive

Amount

92.54

City

Amherst

State

NH

Zip Code

03031

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

☐

President

District: 01

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

1591.48

Disbursement For:

2010

☐

Primary

☒

General

☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

425.04

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **9 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Melissa Chauvette

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
180 Alsace St. #3

Amount

616.26

City	State	Zip Code
Manchester	NH	03102

Purpose of Expenditure
Canvasser PaymentCategory/
Type
Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 21558.93Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Kalan Cleary

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
210 Manison R.d

Amount

195.00

City	State	Zip Code
Dunbarton	NH	03046

Purpose of Expenditure
Canvasser PaymentCategory/
Type
Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 17660.89Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Stacy Collier

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
112 W. Bridge St #11

Amount

50.00

City	State	Zip Code
Morrisville	PA	19067

Purpose of Expenditure
Canvasser PaymentCategory/
Type
Office Sought: ☒ House State: PA
☐ Senate District: 08
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 8659.04Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

861.26

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Brad Collins

Date

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0Mailing Address
66 Teal Drive

Amount

540.00

City
LanghorneState
PAZip Code
19047

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

12685.98

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Daniel Conroy

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
32 Ivy Hill Rd.

Amount

300.00

City
LevittownState
PAZip Code
19057

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

2241.54

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Continental

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

338.80

City

State

Zip Code

Purpose of Expenditure

Field Travel

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

42899.85

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1178.80

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Asa Costley-Bupp

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

135 Winchester St.

Amount

1020.00

City

Newton Highlands

State

MA

Zip Code

02461

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

2611.48

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Roosevelt Cox

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

358 Winding Pond Rd.

Amount

2.71

City

Londonder

State

NH

Zip Code

03053

Purpose of Expenditure

Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

25698.26

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Craigslist

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	0

Mailing Address

Amount

25.00

City

State

Zip Code

Purpose of Expenditure

Recruitment Ads for Canvassers

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

18203.44

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1047.71

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Michelle Craver

Date

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0Mailing Address
5102 Kansas Ave., NW

Amount

191.52

City State Zip Code
Washington DC 20011Purpose of Expenditure
Travel ReimbursementCategory/
TypeOffice Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 13833.65Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Benjamin Dalzell

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
139 Briar Hill Rd.

Amount

84.50

City State Zip Code
Hopkinton NH 03229Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 3663.04Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Jeff Dalzell

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
139 Briar Hill Rd

Amount

861.21

City State Zip Code
Hopkinton NH 03229Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 16325.94Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1137.23

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **13 / 47**

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NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Shaminga Davis

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

937 W. Trenton Ave. Apt. B3

Amount

50.00

City

Morrisville

State

PA

Zip Code

19067

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Disbursement For:

2010

☐ Primary☒ General☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

8609.04

Full Name (Last, First, Middle Initial) of Payee

Douglas Desrochers

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

185 Taylor St. #1

Amount

78.00

City

Manchester

State

NH

Zip Code

03103

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Disbursement For:

2010

☐ Primary☒ General☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

8460.58

Full Name (Last, First, Middle Initial) of Payee

Luis Dorta

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

12 Ring Lane

Amount

550.00

City

Levittown

State

PA

Zip Code

19055

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Disbursement For:

2010

☐ Primary☒ General☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

6859.04

(a) **SUBTOTAL** of Itemized Independent Expenditures

678.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

Image# 11930286570
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Leslie Durkee

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
32 Ivey Hill Rd.

Amount

400.00

City State Zip Code
Levittown PA 19057

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 6309.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Alison Eberle

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
126 E. Maple Ave Apt. B5

Amount

150.00

City State Zip Code
Morrisville PA 19067

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 200.00

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Experia

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	0

Mailing Address

Amount

1377.28

City State Zip Code

Purpose of Expenditure
Field Travel

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 19580.72

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

1927.28

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Expedia

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

1208.20

Purpose of Expenditure
Field TravelCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

44108.05

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Facebook

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

214.00

Purpose of Expenditure
Recruitment Ads for CanvasserCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

44322.05

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Kirsten Feyling

Date

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0Mailing Address
1825 K St. NW
Suite 210

Amount

103.25

City State Zip Code
Washington DC 20006Purpose of Expenditure
Travel ReimbursementCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

13084.32

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1525.45

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **16 / 47**

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NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Dudd Kirk Flanagan

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

5929 Emilie Rd.

Amount

250.00

City

Levittown

State

PA

Zip Code

19057

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

District: 08

☐

President

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Disbursement For:

☐

Primary

☒ General☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

3289.04

Full Name (Last, First, Middle Initial) of Payee

Jasmine Franchitti

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

6016 Falmont Dr.

Amount

50.00

City

Morrisville

State

PA

Zip Code

19067

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

District: 08

☐

President

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Disbursement For:

☐

Primary

☒ General☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

4739.04

Full Name (Last, First, Middle Initial) of Payee

Granite State Progress

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

4 Park St.

Amount

2000.00

City

Concord

State

NH

Zip Code

03301

Purpose of Expenditure

Salary for Canvass Directory

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

District: 01

☐

President

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Disbursement For:

☐

Primary

☒ General☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

13590.82

(a) **SUBTOTAL** of Itemized Independent Expenditures

2300.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Wendy Greenleafe

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
PO Box 183

Amount

91.92

City
NottinghamState
NHZip Code
03290Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

30148.91

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Frances Haas

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

48 Stratham Hgts. Rd.

Amount

441.32

City
StrathamState
NHZip Code
03885Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

9546.32

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Cody Harke-Weliky

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

43 Oakview Ter. Apt. 1

Amount

240.50

City
BostonState
MAZip Code
02130Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

8382.58

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

773.74

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **18 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Melissa Harley

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
506 Nel Dr.

Amount

350.00

City
Fairless HillsState
PAZip Code
19030Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

7509.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Jonathan Harrigan

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
61 Mistletoe Lane

Amount

150.00

City
LevittownState
PAZip Code
19054Purpose of Expenditure
canvasser paymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

5089.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Alexis Hawkins

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
26 Bridle Path

Amount

1166.25

City
ShrewsburgState
MAZip Code
01545Purpose of Expenditure
Canvasser paymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

1166.25

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1666.25

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **19 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Joseph Herman

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
347 Washington St.

Amount

85.00

City State Zip Code
Bristol PA 19007Purpose of Expenditure
canvasser paymentCategory/
TypeOffice Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought 5174.04Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Lauren Hoffman

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
1191 gorham Pond Rd.

Amount

288.49

City State Zip Code
Dunbarton NH 03046Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought 18959.76Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Lisa Hough-Kovacs

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
PO Box 305

Amount

479.35

City State Zip Code
Contoocoo NH 03229Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentCheck One: ☒ Support ☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought 19439.11Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

852.84

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **20** / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Ayla Jordan

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

20 Hosley St.

Amount

602.73

City

Manchester

State

NH

Zip Code

03103

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

3578.54

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Chelsea Karacz

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

1105 Central Ave

Amount

450.00

City

Feasterville

State

PA

Zip Code

19053

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

1732.50

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Alexey Karavitchev

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

1570 Hummingbird Ct.

Amount

50.00

City

Yardley

State

PA

Zip Code

19067

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

50.00

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1102.73

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Anna Kavanagh

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

51 Neptune Lne.

Amount

150.00

City

Levittown

State

PA

Zip Code

19054

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

11255.47

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Deborah Kavanagh

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

51 Neptune Lane

Amount

300.00

City

Levittown

State

PA

Zip Code

19054

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

3039.04

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Christina Keane

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

393 Laurel St. #1

Amount

510.54

City

Manchester

State

NH

Zip Code

03103

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

☐

President

District: 01

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

7899.53

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

960.54

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 11930286578
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Andrea Knoblock

Date

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

Mailing Address
82 Nightingale Ln.

Amount

350.00

City State Zip Code
Levittown PA 19054

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 11619.77

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Richard Komi

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
493 Spruce St.

Amount

2.86

City State Zip Code
Manchester NH 03103

Purpose of Expenditure
Mileage Reimbursement

Category/
Type

Office Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTER

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 23860.30

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Brittany Larson

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	1	0

Mailing Address
1825 K St. NW
Suite 210

Amount

14.30

City State Zip Code
Washington DC 20006

Purpose of Expenditure
Travel Reimbursement

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 11269.77

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

367.16

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 23 / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Gary Dean Ledbetter

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

1564 Hookset Rd. #106

Amount

350.51

City

Hookset

State

NH

Zip Code

03106

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

10601.28

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Cendric Lefungula

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

64 Huntington Ave.

Amount

507.65

City

Manchester

State

NH

Zip Code

03109

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

6764.99

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Mary Luckers

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

27 Kings Court

Amount

294.81

City

Manchester

State

NH

Zip Code

03103

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

20942.67

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1152.97

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 11930286580
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Kayla Mailhot

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address

126 Mooseclub Park Rd

Amount

32.50

City

Goffstown

State

NH

Zip Code

03045

Purpose of Expenditure

canvasser payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate

☐ President

District: 01

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

32549.87

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Laura Mansnerus

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

2411 Waverly St.

Amount

300.00

City

Philadelphia

State

PA

Zip Code

19146

Purpose of Expenditure

Canvasser payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate

☐ President

District: 08

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

5909.04

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Erin Lee Marcello

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

925 Hayward St.

Amount

104.00

City

Manchester

State

NH

Zip Code

03103

Purpose of Expenditure

canvasser payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate

☐ President

District: 01

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

8564.58

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

436.50

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 25 / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Michael Marinello

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
12 Ring Lane

Amount

100.00

City
LevittownState
PAZip Code
19055Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

8059.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Ashley Marshall

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
189 Central St.

Amount

364.33

City
ManchesterState
NHZip Code
03103Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

2975.81

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Crystal Martzall

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
PO Box 384

Amount

89.04

City
ReamstownState
PAZip Code
17567Purpose of Expenditure
Canvasser food and reimbursment for cell phone usageCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

1941.54

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

553.37

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Jason Maxwell

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
204 Trenton Rd.

Amount

200.00

City
Fairless HillsState
PAZip Code
19030Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

4939.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Robert Mickle

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
2 Mountain Ash Lane, Apt. 212

Amount

1191.75

City
GoffstonwState
NHZip Code
03045Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

25052.05

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Gita Mishra

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
478 Notre Dame Ave.

Amount

989.54

City
ManchesterState
NHZip Code
03102Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

11590.82

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

2381.29

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Monster

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

99.00

City

State

Zip Code

Purpose of Expenditure

Recruitment Ads for Canvassers

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

44421.05

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Ronald Moody

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

140 Central St.

Amount

643.50

City

State

Zip Code

Manchester

NH

03103

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

25695.55

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
New Hampshire Citizens Alliance for Action

Date

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

Mailing Address

4 Park Street
Suite 304

Amount

3000.00

City

State

Zip Code

Concord

NH

03301

Purpose of Expenditure

Payment for Canvass Organization and work

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

35918.74

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

3742.50

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 28 / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Barry Norman

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

32 Ivy Hill Rd.

Amount

150.00

City

Levittown

State

PA

Zip Code

19057

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

District: 08

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Disbursement For:

☐

Primary

☒

General

☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

832.50

Full Name (Last, First, Middle Initial) of Payee

Priscilla Nyemah

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

130 Middle St. Apt 4

Amount

429.00

City

Manchester

State

NH

Zip Code

03101

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

District: 01

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Disbursement For:

☐

Primary

☒

General

☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

23528.09

Full Name (Last, First, Middle Initial) of Payee

Christian Orellana

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

323 Lowell St.

Amount

624.00

City

Manchester

State

NH

Zip Code

03104

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

District: 01

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Disbursement For:

☐

Primary

☒

General

☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

7388.99

(a) SUBTOTAL of Itemized Independent Expenditures

1203.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **29** / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Lynsay Ouimette

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

104 Bluestone Dr.

Amount

243.75

City

Nashua

State

NH

Zip Code

03062

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

☐

President

District: 01

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

19682.86

Disbursement For:

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Neil Payne

Date

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

Mailing Address

1601 Argonne Place NW
Apt 232

Amount

506.14

City

Washington

State

DC

Zip Code

20009

Purpose of Expenditure

Travel Reimbursement

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

16271.31

Disbursement For:

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Richard Pierson

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

32 Ivy Hill Rd.

Amount

50.00

City

Levittown

State

PA

Zip Code

19057

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 08

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

8259.04

Disbursement For:

☐

Primary

☒

General

☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

799.89

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **30 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Kathleen Prescod

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

185 Kenwood Dr. N

Amount

190.00

City

Levittown

State

PA

Zip Code

19055

Purpose of Expenditure
canvasser paymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

5609.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
PR Newswire

Date

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Mailing Address

G.P.O. Box 5897

Amount

260.00

City

New York

State

NY

Zip Code

10087-5897

Purpose of Expenditure
Canvass AdvertisingCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

32809.87

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Mark Provos

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

217 Cameron St.

Amount

965.00

City

Manchester

State

NH

Zip Code

03103

Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

20647.86

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1415.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **31** / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
QMS

Date

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0Mailing Address
4829 Fairmont Ave
Suite B

Amount

City State Zip Code
Bethesda MD 20814

21.87

Purpose of Expenditure
Courier Service for CanvassCategory/
TypeOffice Sought: ☒ House State: NH
☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 32918.74Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
QMS

Date

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0Mailing Address
4829 Fairmont Ave
Suite B

Amount

City State Zip Code
Bethesda MD 20814

79.01

Purpose of Expenditure
courier service for CanvassCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 14054.95Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Christine Reuschel

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
116 S. Taylor St.

Amount

City State Zip Code
Manchester NH 03103

242.55

Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
TypeOffice Sought: ☒ House State: NH
☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 8142.08Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

343.43

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Adam Reynolds-Reuschel

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
116 S. Taylor St.

Amount

182.80

City State Zip Code
Manchester NH 03103Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 182.80Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Zandra Rice-Hawkins

Date

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0Mailing Address
85 Danis Park Road

Amount

543.01

City State Zip Code
Goffstown NH 03045Purpose of Expenditure
Canvass food and travel reimbursementCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 30691.92Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Matthew Rivera

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
32 Ivy Hill Rd.

Amount

300.00

City State Zip Code
Levittown PA 19057Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 7159.04Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1025.81

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 11930286589
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE **33** / 47

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Marti Rosenberg

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address
31 Talbot Manor

Amount

473.81

City State Zip Code
Cranston RI 02905

Purpose of Expenditure
travel reimbursement

Category/
Type

Office Sought: ☒ House State: PA
☐ Senate
☐ President District: 08

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 13642.13

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Carolyn Roush

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address
1825 K St. NW
Suite 210

Amount

242.84

City State Zip Code
Washington DC 20006

Purpose of Expenditure
Travel Reimbursement

Category/
Type

Office Sought: ☒ House State: PA
☐ Senate
☐ President District: 08

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 12928.82

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Ngirabukuni Ruhuara

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
143 Orange St.

Amount

535.91

City State Zip Code
Manchester NH 03104

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: NH
☐ Senate
☐ President District: 01

Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTER

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 23099.09

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

1252.56

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **34 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Kelsey Russell

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
83 Wheeler Rd.

Amount

389.63

City	State	Zip Code
Hollis	NH	03049

Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type
Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 18050.52Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
F. Noel Sagna

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
3 Molly Stark Ln.

Amount

540.42

City	State	Zip Code
New Boston	NH	03070

Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type
Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 9105.00Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Heyward Samuel, Jr.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
23 Dianna Rd.

Amount

999.66

City	State	Zip Code
Londonder	NH	03053

Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type
Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 14590.48Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1929.71

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **35 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

Moses Sawyer

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

13a Orange St. #3

Amount

422.50

City

Manchester

State

NH

Zip Code

03104

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

21981.43

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Carin Schiewe

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address

1 Weeks Ave

Amount

253.20

City

Roslindale

State

MA

Zip Code

02131

Purpose of Expenditure

Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Calendar Year-To-Date Per Election
for Office Sought

31495.12

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Courtney Schodowski

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

1503 A Edgely Rd.

Amount

50.00

City

Levittown

State

PA

Zip Code

19057

Purpose of Expenditure

Canvasser payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

1852.50

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

725.70

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **36 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Kristina Schultz

Date

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

Mailing Address
804 Alton Woods Dr

Amount

550.00

City
ConcordState
NHZip Code
03301

Purpose of Expenditure

Canvass Director Salary - 1 week

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

31241.92

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
G. Silvia Sironich-Kalkan

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Mailing Address
10 Tether Rd.

Amount

704.45

City
BedfordState
NHZip Code
03110

Purpose of Expenditure

Canvasser Payment and Mileage Reimbursement

Category/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

10250.77

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
David Solender

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Mailing Address
PO Box 10415

Amount

97.50

City
BedfordState
NHZip Code
03110

Purpose of Expenditure

Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

2339.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1351.95

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Staples

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
Dept.51 - 7872191902
Staples Credit Plan

Amount

2669.31

City
Des MoinesState
IAZip Code
50368-9020Purpose of Expenditure
Canvass Supplies for NHCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

28367.57

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Staples

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
Dept.51 - 7872191902
Staples Credit Plan

Amount

1023.02

City
Des MoinesState
IAZip Code
50368-9020Purpose of Expenditure
Canvass Supplies for PACategory/
TypeOffice Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

9682.06

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Matthew Stetson

Date

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0Mailing Address
854 N 22nd St. #3

Amount

50.00

City
PhiladelphiaState
PAZip Code
19130Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

14104.95

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

3742.33

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **38 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Steve Stidham

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
7 Library Way

Amount

300.00

City

Levittown

State

PA

Zip Code

19055

Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

9982.06

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Marc Stier

Date

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

Mailing Address

6714 Wissahickon Avenue

Amount

133.00

City

Philadelphia

State

PA

Zip Code

19119

Purpose of Expenditure
Travel ReimbursementCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

15765.17

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Wallace Tabron

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Mailing Address

12 Ring Lane

Amount

250.00

City

Levittown

State

PA

Zip Code

19055

Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

10745.47

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

683.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **39 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Huzan Taha

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
90 Trahan St. #90

Amount

471.25

City
ManchesterState
NHZip Code
03103Purpose of Expenditure
Canasser PaymentCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

15061.73

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Jouan Taha

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
90 Trahan St. #90

Amount

600.45

City
ManchesterState
NHZip Code
03103Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

17465.89

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Raymond Torres

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
144 W. Durham St.

Amount

150.00

City
PhiladelphiaState
PAZip Code
19119Purpose of Expenditure
Canvasser PaymentCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

8209.04

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1221.70

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **40 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Trucksmart

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	0

Mailing Address
127 Lincoln Hwy

Amount

1236.54

City
Fairless HillsState
PAZip Code
19030Purpose of Expenditure
Vans for PA CanvassCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

18178.44

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
UPS

Date

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

Mailing Address
PO BOX 7247-0244

Amount

359.59

City
PhiladelphiaState
PAZip Code
19170-0001Purpose of Expenditure
Overnight deliveries to PA CanvassCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

16630.90

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
UPS

Date

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

Mailing Address
PO BOX 7247-0244

Amount

146.38

City
PhiladelphiaState
PAZip Code
19170-0001Purpose of Expenditure
Overnight Deliveries to NH CanvassCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

36065.12

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1742.51

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Jonathan Urena-Cherry

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
398 Bridge St. #3

Amount

539.50

City State Zip Code
Manchester NH 03104Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 16865.44Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Nathan Urena-Cherry

Date

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0Mailing Address
363 Kimball St.

Amount

581.75

City State Zip Code
Manchester NH 03102Purpose of Expenditure
Canvasser PaymentCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 22563.18Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
USAirways

Date

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Mailing Address

Amount

229.80

City State Zip Code

Purpose of Expenditure
Field TravelCategory/
TypeOffice Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 44650.85Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1351.05

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **42 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Verizon

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
PO Box 15026

Amount

293.93

City
AlbanyState
NYZip Code
12212-5026Purpose of Expenditure
Internet for Canvass OfficeCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate

District: 08

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

10495.47

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Charlie Vidsens

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
11 River Lane

Amount

350.00

City
LevittownState
PAZip Code
19055Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate

District: 08

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

1282.50

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Agnes Vollkomer

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
40 Hillside Dr.

Amount

1316.14

City
GiffordState
NHZip Code
03249Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate

District: 01

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

1498.94

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1960.07

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **43 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Sarah Von Esch

Date

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0Mailing Address
1825 K St. NW
Suite 210

Amount

87.00

City
WashingtonState
DCZip Code
20006Purpose of Expenditure
Travel ReimbursementCategory/
Type

Office Sought:

☒ House

State: NH

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCalendar Year-To-Date Per Election
for Office Sought

32896.87

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Ross Wallen

Date

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0Mailing Address
1825 K St. NW
Suite 210

Amount

142.29

City
WashingtonState
DCZip Code
20006Purpose of Expenditure
Travel ReimbursementCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

13975.94

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Barbar Walsh

Date

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0Mailing Address
66 Teal Drive

Amount

526.21

City
LanghorneState
PAZip Code
19047Purpose of Expenditure
Canvasser Payment and Mileage ReimbursementCategory/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate☐ President

District: 08

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCalendar Year-To-Date Per Election
for Office Sought

12145.98

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

755.50

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
David Walsh

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
472 Lawrence Circle

Amount

400.00

City State Zip Code
Langhorne PA 19047

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 2739.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Jan Wawrzyniek

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
7 Northbrook Dr. #70

Amount

403.00

City State Zip Code
Manchester NH 03102

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: NH
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTER

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 15464.73

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Howard Wharton

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
11 River Lane

Amount

450.00

City State Zip Code
Levittown PA 19055

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 4039.04

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

1253.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE **45 / 47**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Kenneth Wickhorst

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
168 Merrimack St. #2

Amount

620.75

City	State	Zip Code
Manchester	NH	03103

Purpose of Expenditure
Canvasser PaymentCategory/
Type
 Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 18671.27Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Ralph Willette

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
18 Dominique Dr.

Amount

329.35

City	State	Zip Code
Concord	NH	03301

Purpose of Expenditure
Canvasser PaymentCategory/
Type
 Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
CAROL SHEA-PORTERCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 23857.44Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Andrew Woodrow

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
12 Ring Lane

Amount

150.00

City	State	Zip Code
Levittown	PA	19055

Purpose of Expenditure
Canvasser PaymentCategory/
Type
 Office Sought: ☒ House State: PA
☐ Senate District: 08
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHYCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 482.50Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

1100.10

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee
Richard Wyatt

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
236 Bank St.

Amount

250.00

City
Morrisville

State
PA

Zip Code
19067

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate

District: 08

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

8509.04

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Kristen Zearfoss

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	0

Mailing Address
1825 K St. NW
Suite 210

Amount

84.00

City
Washington

State
DC

Zip Code
20006

Purpose of Expenditure
Travel Reimbursement

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate

District: 08

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

13168.32

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Colin Zelin

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address
4 Pennsbury Ct.

Amount

70.00

City
Yardley

State
PA

Zip Code
19067

Purpose of Expenditure
Canvasser Payment

Category/
Type

Office Sought:

☒ House

State: PA

House

☐ Senate

District: 08

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK J. MURPHY

Calendar Year-To-Date Per Election
for Office Sought

1802.50

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

404.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

USACTION

Full Name (Last, First, Middle Initial) of Payee

C. Olivia Zink

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	0

Mailing Address

4 Park St. Suite 304

Amount

2594.30

City

Concord

State

NH

Zip Code

03301

Purpose of Expenditure

Canvass Salary, Supplies and Food

Category/
Type

Office Sought:

☒

House

State: NH

House

☐

Senate

☐

President

District: 01

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CAROL SHEA-PORTER

Disbursement For:

☐

Primary

☒

General

2010

☐ Other (specify)Calendar Year-To-Date Per Election
for Office Sought

6257.34

(a) SUBTOTAL of Itemized Independent Expenditures

2594.30

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

65397.82