One Beacon Street
Boston, Massachusetts 02108

Telephone 617-646-5400
Facsimile 617-646-5451
www.harborsidehealthcare.com

RECEIVED
FEC MAIL CENTER

2007 APR 17 AM 9:09

HARBORSIDE
Healthcare

April 13, 2007

Federal Election Commission
999 E Street N.W.
Washington, D.C. 20463

Re: Harborside Healthcare Corporation PAC Form FEC 3X

Gentlemen:

Enclosed please find the above referenced covering the following periods:

7/1/05 – 12/31/05
1/1/06 – 3/31/06
4/1/06 – 6/30/06
7/1/06 – 9/30/06
10/1/06 – 12/31/06

We realize that these forms are long overdue but we have been unable to compile the information necessary to accurately complete the forms and file them prior to the due dates.

Throughout the periods covered by these reports, while the aggregate dollars contributed to the Harborside PAC was relatively small, the amounts were collected from an ever increasing number of contributors. Unfortunately, during this period of significant increase in contribution activity, Harborside Healthcare struggled with continuing employee turnover in the department responsible for tracking the contributions. Additionally, the Harborside information technology infrastructure and software systems were unable to complete the reports containing the information necessary to accurately prepare the attached within the required deadlines.

We respectfully request that you waive any late filing penalties that may be imposed in connection with the late filing of the enclosed. The enclosed Forms 3X are being filed after the required due date due to unfortunate circumstances beyond our reasonable control and are not the result of willful neglect.

Thank you for your consideration in this matter. If you have any questions, please contact the undersigned at (617) 646-5400.

Sincerely,

Wayne F. Craig

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED MAIL CENTER 2007 APR 17 AM 9:09

Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines.

12FE4M5

HARBORSIDE HEALTHCARE CORPORATION PAC

ADDRESS (number and street) ▼

ONE BEACON STREET

SUITE 1100

☐ Check if different than previously reported. (ACC)

BOSTON — MA — 02108 -

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00350074

3. IS THIS REPORT ☐ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☐ May 20 (M5)	☐ Aug 20 (M8)	☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on ___ / ___ / ___ in the State of ___

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ___ / ___ / ___ in the State of ___

5. Covering Period 07 / 01 / 2005 through 12 / 31 / 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Wayne Craig

Signature of Treasurer: [signature]

Date 04 / 13 / 2007

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

Office Use Only

FEC FORM 3X Rev. 12/2004

FE5AN015

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Report Covering the Period: From: 07 / 01 / 2005 To: 12 / 31 / 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2005		1293444
(b) Cash on Hand at Beginning of Reporting Period	470896	
(c) Total Receipts (from Line 19)	294029	1413981
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	764925	2707425
7. Total Disbursements (from Line 31)	287500	2230000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	477425	477425
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)		

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Harborside Healthcare Corporatoin PAC

Report Covering the Period: From: 07 / 01 / 2005 To: 12 / 31 / 2005

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	292145	
(ii) Unitemized	1884	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	294029	1413981
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	294029	1413981
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶		

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2875.00	22300.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2875.00	22300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	2875.00	22300.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 1 OF 17

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)

Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Almeida, Andrew
Mailing Address: One Beacon St., Suite 1100
City: Boston, State: MA, Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: VP Compliance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 52000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 0

B.
Full Name (Last, First, Middle Initial): Anderson, Camille
Mailing Address: One Beacon St., Suite 1100
City: Bosotn, State: MA, Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Office Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 17000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 4000

C.
Full Name (Last, First, Middle Initial): Beardsley, Bruce
Mailing Address: One Beacon St., Suite 1100
City: Boston, State: MA, Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: VP Acquisitions
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 99996
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 49998

SUBTOTAL of Receipts This Page (optional) ▶

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

27050425030

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) — PAGE 2 OF 17

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full): Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Cleary, Kevin
Mailing Address: 225 Amity Road
City: Woodbridge, CT State: Zip Code: 06525
FEC ID number of contributing federal political committee: C00350074
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 6000
Name of Employer: Harborside CT LP
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 3200

B.
Full Name (Last, First, Middle Initial): Doyle, Stephen
Mailing Address: 6 Morrill Place
City: Amesbury, MA State: Zip Code: 01913
FEC ID number of contributing federal political committee: C00350074
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 0
Name of Employer: Harborside Mass LP
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1950

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C00350074
Date of Receipt: / /
Amount of Each Receipt this Period:
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:

SUBTOTAL of Receipts This Page (optional) ▶

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

27039423570

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside HeaathcareeCorporation PAC

A.
Full Name (Last, First, Middle Initial): Coppola, Susan
Mailing Address: One Beacon St., Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Sr VP Clinical OP's
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 21000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 1500

B.
Full Name (Last, First, Middle Initial): Damian, Martin
Mailing Address: One Beacon St., Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Adm Svc
Occupation: Mgr Operatio Quality
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 4250 0
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 10000

C.
Full Name (Last, First, Middle Initial): Dawes, Natalie
Mailing Address: One Beacon St., Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Admin Assistant
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 7000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 500

SUBTOTAL of Receipts This Page (optional) ▶

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

27020426271

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 4 OF 17

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Heaalthcare Corp PAC

A. Full Name (Last, First, Middle Initial): Dell'Anno, Damian
Mailing Address: One Beacon St., Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: President/COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 112000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 8000

B. Full Name (Last, First, Middle Initial): Fairbrother, Janelle
Mailing Address: One Beacon St., Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: VP of HR
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1400.0
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 1000.

C. Full Name (Last, First, Middle Initial): Foley, David
Mailing Address: One Beacon St., Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: VP Acquisitions
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 49998
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 24999

SUBTOTAL of Receipts This Page (optional) ▶

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

27939425572

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C00350074
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt 12 / 31 / 2005
Amount of Each Receipt this Period

B.
Full Name (Last, First, Middle Initial) Guillard, Stephen
Mailing Address One Beacon St. Suite 1100
City State Zip Code Boston, MA 02108
FEC ID number of contributing federal political committee. C00350074
Name of Employer Harborside Admin Svc
Occupation CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 210000
Date of Receipt 12 / 31 / 2005
Amount of Each Receipt this Period 0

C.
Full Name (Last, First, Middle Initial) Gwyn, Susan
Mailing Address One Beacon St., Suite 1100
City State Zip Code Boston, MA 02108
FEC ID number of contributing federal political committee. C00350074
Name of Employer Harborside Admin Svc
Occupation Sr VP Ancillary
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 65000
Date of Receipt 12 / 31 / 2005
Amount of Each Receipt this Period 32500

SUBTOTAL of Receipts This Page (optional) ▶

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

27039425142

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporatoin PAC

A.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C 0 0 3 5 0 0 7 4
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt
Amount of Each Receipt this Period

B.
Full Name (Last, First, Middle Initial): Goodpeater, Bruce
Mailing Address: 4700 Harford Rd
City State Zip Code: Baltimore,MD 21214
FEC ID number of contributing federal political committee. C 0 0 3 5 0 0 7 4
Name of Employer: Harborside Baltimore LP
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2 5 5 0 0
Date of Receipt: 1 2 / 3 1 / 2 0 0 5
Amount of Each Receipt this Period: 6 0 0 0

C.
Full Name (Last, First, Middle Initial): Gamenthaler, Faith
Mailing Address: 2900 12th St., North
City State Zip Code: Naples, FL 34103
FEC ID number of contributing federal political committee. C 0 0 3 5 9 9 8 4
Name of Employer: 2900 12th St., North LLC
Occupation: Nurse
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1 0 0 0
Date of Receipt: 1 2 / 3 1 / 2 0 0 5
Amount of Each Receipt this Period: 0

SUBTOTAL of Receipts This Page (optional) ▶

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

27039423574

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 7 OF 17

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Lynch, Gail
Mailing Address: One Beacon St., Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Dir of Loss Prevention
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 34000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 8000

B.
Full Name (Last, First, Middle Initial): Montima, Yves
Mailing Address: One Beacon St., Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Accountant
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 16152
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 1150

C.
Full Name (Last, First, Middle Initial): Murphy, Francis
Mailing Address: One Beacon Street, Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 26000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 13000

SUBTOTAL of Receipts This Page (optional) ▶

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

27934257

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Haggerty, Robert
Mailing Address: One Beacon Street Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 1500
Name of Employer: Harborside Admin Svc
Occupation: Sr VP H.R.
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 21000

B.
Full Name (Last, First, Middle Initial): Judware, George'
Mailing Address: One BeaconsStreet, Suite 1100
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 13000
Name of Employer: Harborside,Adm Svc
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 26000

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C00350074
Date of Receipt: / /
Amount of Each Receipt this Period:
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:

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

27039423576

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)

Harbourside Healthcare Corporation PAC

A.

Full Name (Last, First, Middle Initial): Maggard, Billy

Mailing Address: 2900 12 St North

City: Naples, FL State: Zip Code: 34103

FEC ID number of contributing federal political committee: C00350074

Date of Receipt: 12/31/2005

Amount of Each Receipt this Period: 4000

Name of Employer: 2900 12 St North LLC

Occupation: Administrator

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 17000

B.

Full Name (Last, First, Middle Initial): Merritt, Peter

Mailing Address: 1104 Wesley Avenue

City: State: Zip Code:

FEC ID number of contributing federal political committee: C00350074

Date of Receipt: 12/31/2005

Amount of Each Receipt this Period: 0.

Name of Employer: Harborside Ohio LP

Occupation: Administrator

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 9000

C.

Full Name (Last, First, Middle Initial): Middleton, Susan

Mailing Address: 8 Snow Rd

City: Winchester, NU State: Zip Code: 03470

FEC ID number of contributing federal political committee: C00350074

Date of Receipt: 12/31/2005

Amount of Each Receipt this Period: 2500

Name of Employer: Harborside NH LP

Occupation: Administrator

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 9000

SUBTOTAL of Receipts This Page (optional) ▶

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

27039425577

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): O'Connell, Kevin
Mailing Address: One Beacon Street, Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborsdie Admin Svc
Occupation: Regional VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 42500
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 10000

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City, State, Zip Code:
FEC ID number of contributing federal political committee: C00350074
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: / /
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial): Ryan, John
Mailing Address: One Beacon St., Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborsdie Admin Svc
Occupation: VP Acquistions
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 21000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 1500

SUBTOTAL of Receipts This Page (optional) ▶

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27039425576

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C00350074
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt
Amount of Each Receipt this Period

B.
Full Name (Last, First, Middle Initial): Roth, Linda
Mailing Address: 323 Forest Avenue
City: Dayton, OH 45405
State Zip Code
FEC ID number of contributing federal political committee. C00350074
Name of Employer: Harborside Dayton LP
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300 00
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 4000

C.
Full Name (Last, First, Middle Initial): Rumple, Karen
Mailing Address: One Beacon Street, S1100
City: Boston, MA 02108
State Zip Code
FEC ID number of contributing federal political committee. C00350074
Name of Employer: Harborside Admin Service
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2307
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 0

SUBTOTAL of Receipts This Page (optional) ▶

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

27039425579

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) — PAGE 12 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full): Harborside Healthcare Corporatoin PAC

A. Full Name (Last, First, Middle Initial): Spinelli, Stephen
Mailing Address: One Beacon St., Suite 1100
City / State / Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Dir of Education
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 7500
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 1000

B. Full Name (Last, First, Middle Initial): Shiverick, Bradley
Mailing Address: One Beacon St., Suite 1100
City / State / Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: VP Quality
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 32500
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 0

C. Full Name (Last, First, Middle Initial): Stephan, William
Mailing Address: One Beacon Street, Suite 1100
City / State / Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Adm Svc
Occupation: C.F.O.
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 99996
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 49998

SUBTOTAL of Receipts This Page (optional) ▶

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

27059425580

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C00350074
Date of Receipt
Amount of Each Receipt this Period
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼

B.
Full Name (Last, First, Middle Initial): Slobin, Barbara
Mailing Address: 34 Wildwood Avenue
City State Zip Code: Madison, CT 06443
FEC ID number of contributing federal political committee. C00350074
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 1500
Name of Employer: Harborside Ct LP
Occupation: Director of Nursing
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 8000

C.
Full Name (Last, First, Middle Initial): Spriggs, Michelle
Mailing Address: 30 Colby Court
City State Zip Code: Bedford, NH 03110
FEC ID number of contributing federal political committee. C00350074
Date of Receipt: 06 / 30 / 2005
Amount of Each Receipt this Period: 1000
Name of Employer: Harborside NH LP
Occupation: Director of Nursing
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 14000

SUBTOTAL of Receipts This Page (optional) ▶

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27039425561

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 14 OF 17

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)

Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Stevenson, Sean
Mailing Address: One Beacon Street, Suite 1100
City: Boston, State: MA, Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside AdmlSvc
Occupation: Regional VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 13000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 0

B.
Full Name (Last, First, Middle Initial): Talamona, Raymond
Mailing Address: One Beacon Street, Suite 1100
City: Boston, State: MA, Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Adm Srv
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 60000
Date of Receipt: 2/31/2005
Amount of Each Receipt this Period: 8000

C.
Full Name (Last, First, Middle Initial): Terry, David
Mailing Address: One Beacon Street, Suite 1100
City: Boston, State: MA, Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 60000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 8000

SUBTOTAL of Receipts This Page (optional) ▶

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

27039423582

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Torres, Maria
Mailing Address: One Beacon Street, Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Admin Svc
Occupation: Payroll Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 0

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City, State, Zip Code:
FEC ID number of contributing federal political committee: C00350074
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt:
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial): White, Linda
Mailing Address: One Beacon Street, Suite 1100
City, State, Zip Code: Boston, MA 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside Adm Svc
Occupation: Director of MIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 28000
Date of Receipt: 12 / 31 / 2005
Amount of Each Receipt this Period: 2000

SUBTOTAL of Receipts This Page (optional) ▶

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

27039425852

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 16 OF 17

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)

Harborside Healthcare Corporation PAC

A.

Full Name (Last, First, Middle Initial): Politz, Samuel

Mailing Address: 34921 US Highway 19 N Suite 415

City, State, Zip Code: Palm Harbor, FL 34684

FEC ID number of contributing federal political committee: C00350074

Date of Receipt: 12/31/2005

Amount of Each Receipt this Period: 3500

Name of Employer:

Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 10000

B.

Full Name (Last, First, Middle Initial): Wetmore, Elizabeth

Mailing Address: 850 Mix Avenue

City, State, Zip Code: Hamden, CT 06514

FEC ID number of contributing federal political committee: C00350074

Date of Receipt: 12/31/2005

Amount of Each Receipt this Period: 3000

Name of Employer: Harborside CT LP

Occupation: Dir of Admissions

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 6000

C.

Full Name (Last, First, Middle Initial): Rutolo, Pasquale

Mailing Address: 225 Amity Road

City, State, Zip Code: Woodbridge, CT 06525

FEC ID number of contributing federal political committee: C00350074

Date of Receipt: 12/31/2005

Amount of Each Receipt this Period: 0

Name of Employer:

Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 4500

SUBTOTAL of Receipts This Page (optional) ▶

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

27039425584

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A. Full Name (Last, First, Middle Initial): Stewart, Joann
Mailing Address: 34 Wildwood Avenue
City: Madison, CT State: Zip Code: 06443
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Harborside CT LP
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 18000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 5000

B. Full Name (Last, First, Middle Initial): Theroux, Robert
Mailing Address: 161 Falmouth Rd.
City: Mashpee, MA State: Zip Code: 02649
FEC ID number of contributing federal political committee: C00350074
Name of Employer: Mashpee, MA 02649
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 8500
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Schmid, Valerie
Mailing Address: One Beacon Street, Suite
City: Boston, MA State: Zip Code: 02108
FEC ID number of contributing federal political committee: C00350074
Name of Employer:
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 17000
Date of Receipt: 12/31/2005
Amount of Each Receipt this Period: 4000

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 292145

27050425255

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☑ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 1 OF 1

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporatoin PAC

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

Mailing A

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

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

Date of Disbursement

Amount of Each Disbursement this Period

B.
Full Name (Last, First, Middle Initial)
Pryce Project

Mailing Address
611 Pennsylvania Ave SE #42

City State Zip Code
Washington, DC 20003

Purpose of Disbursement

Candidate Name

Category/Type
011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

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

Date of Disbursement
07 / 11 / 2005

Amount of Each Disbursement this Period
87500

C.
Full Name (Last, First, Middle Initial)
Friends For Max Baucus

Mailing Address
818 Connecticut Avenue NW, S1100

City State Zip Code
Washington, DC 20006

Purpose of Disbursement

Candidate Name

Category/Type
011

Office Sought: ☐ House ☐ Senate ☐ President
State District:

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

Date of Disbursement
07 / 21 / 2005

Amount of Each Disbursement this Period
500 00

SUBTOTAL of Disbursements This Page (optional) ▶

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

27039421 0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Harborside Healthcare Corporation PAC

A.
Full Name (Last, First, Middle Initial): Nathan Deal for Congress
Mailing Address: 4775 Clarks Bridge Road
City: Gainsvile, GA State: Zip Code: 30506
Purpose of Disbursement:
Candidate Name:
Category/Type: 0 1 1
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 19 / 2005
Amount of Each Disbursement this Period: 5 0 0 0 0

B.
Full Name (Last, First, Middle Initial): Johnson for Congress Committee
Mailing Address: PO Box 1986
City: New Britain, CT State: Zip Code: 06050
Purpose of Disbursement:
Candidate Name:
Category/Type: 0 1 1
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2005
Amount of Each Disbursement this Period: 1 0 0 0 0 0

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 2 1 3 0 0 0 0

27024135795

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

☐ Hand Delivered	Date of Receipt
☑ USPS First Class Mail	Postmarked 4/13/07
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐	
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☐ Postmark Illegible	
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Next Business Day Delivery ☐	
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	4/17/07 DATE PREPARED

(3/2005)

27039423588