

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Swing the Vote

ADDRESS (number and street)

P.O. Box 716

Check if different than previously reported. (ACC)

Rindge

NH

03461

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00401919

3. IS THIS REPORT

x

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

X October 15 Quarterly Report(Q3)

January 31 Quarterly 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

2004

through

09

30

2004

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

Leah Anne Brown

Signature of Treasurer

Electronically Filed by Leah Anne Brown

Date

10

18

2004

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. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Swing the Vote

Report Covering the Period: From: ^M07 ^D01 ^Y2004 To: ^M09 ^D30 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		0.00
(b) Cash on Hand at Beginning of Reporting Period	341.61	
(c) Total Receipts (from Line 19)	4978.07	6015.82
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5319.68	6015.82
<hr/>		
7. Total Disbursements (from Line 31)	2050.27	2746.41
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3269.41	3269.41
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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)

Page 3

Write or Type Committee Name

Swing the Vote

Report Covering the Period: From: ^M07 ^D01 ^Y2004 To: ^M09 ^D30 ^Y2004

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)	1740.57	
(ii) Unitemized	3234.65	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	4975.22	6012.97
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4975.22	6012.97
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	2.85	2.85
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4978.07	6015.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4978.07	6015.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	2050.27	2746.41
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2050.27	2746.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	2050.27	2746.41

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	4975.22	6012.97
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4975.22	6012.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	2.85	2.85
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-2.85	-2.85

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

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

FOR LINE NUMBER: PAGE 6 / 35

(check only one)

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

Full Name (Last, First, Middle Initial) A. Mark Anderson		Date of Receipt M / D / Y 09 / 22 / 2004
Mailing Address 5452 S. Kimbark #1		Transaction ID: SA11A1.4292
City Chicago	State IL	Zip Code 60615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer LHS Benefits	Occupation Insurance Broker	Aggregate Year-to-Date ▼ 250.00
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bonnie Carroll		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address 147 MacLean Rd		Transaction ID: SA11A1.4595
City Alstead	State NH	Zip Code 03602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.26
Name of Employer River Mead Retirement Communit	Occupation Nurse	Aggregate Year-to-Date ▼ 205.63
Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

donation

Full Name (Last, First, Middle Initial) C. Anonymous Donors		Date of Receipt M / D / Y 08 / 02 / 2004
Mailing Address		Transaction ID: SA11A1.4182
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.00
Name of Employer	Occupation	Aggregate Year-to-Date ▼ 279.00
Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

cash donations at table,
Keene NH

SUBTOTAL of Receipts This Page (optional)	▶	424.26
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Anonymous Donors		Date of Receipt
Mailing Address		MM / DD / YYYY 08 / 02 / 2004
City State Zip Code		Transaction ID: SA11A1.4293
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Occupation		1.00
Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) B. Anonymous Donors		Date of Receipt
Mailing Address		MM / DD / YYYY 09 / 07 / 2004
City State Zip Code		Transaction ID: SA11A1.4164
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Occupation		10.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	cash donation

Full Name (Last, First, Middle Initial) C. Anonymous Donors		Date of Receipt
Mailing Address		MM / DD / YYYY 09 / 22 / 2004
City State Zip Code		Transaction ID: SA11A1.4185
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Occupation		82.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 372.00	cash don. at table, Bratt- leboro VT 9/11

SUBTOTAL of Receipts This Page (optional)	▶	93.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 35

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Anonymous Donors		Date of Receipt M / D / Y 09 / 22 / 2004
Mailing Address		Transaction ID: SA11A1.4169
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.00
Name of Employer	Occupation	cash donations at table, Keene NH 9/4/04
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	

Full Name (Last, First, Middle Initial) B. Anonymous Donors		Date of Receipt M / D / Y 09 / 22 / 2004
Mailing Address		Transaction ID: SA11A1.4167
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.00
Name of Employer	Occupation	cash donations at table, Orange MA 9/18
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 452.00	

Full Name (Last, First, Middle Initial) C. Patrick J. Maher.		Date of Receipt M / D / Y 09 / 29 / 2004
Mailing Address 187B1 Foggy Bottom Rd		Transaction ID: SA11A1.4305
City	State	Zip Code
Bluemont	VA	20135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation retired	
Receipt For: 2004 Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	590.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 07 / 01 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4587
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.71
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) paper
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 470.24	

Full Name (Last, First, Middle Initial) B. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 07 / 03 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4588
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.24
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 544.48	

Full Name (Last, First, Middle Initial) C. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 07 / 14 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4586
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.70
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies, voter list, office sup
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 578.18	

SUBTOTAL of Receipts TNs Page (optional)	198.85
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rutliff B. Perkins		Date of Receipt M / D / Y 07 / 15 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4597
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.70
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) maps
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 579.88	

Full Name (Last, First, Middle Initial) B. Rutliff B. Perkins		Date of Receipt M / D / Y 07 / 16 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4598
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.22
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) clip-boards
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 592.10	

Full Name (Last, First, Middle Initial) C. Rutliff B. Perkins		Date of Receipt M / D / Y 07 / 17 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4599
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.92
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 605.02	

SUBTOTAL of Receipts This Page (optional)	28.84
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 11 / 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rutlous B. Perkins		Date of Receipt M / D / Y 07 / 10 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4600
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.64
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 606.66	

Full Name (Last, First, Middle Initial) B. Rutlous B. Perkins		Date of Receipt M / D / Y 07 / 23 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4601
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.17
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) clip-boards
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 623.83	

Full Name (Last, First, Middle Initial) C. Rutlous B. Perkins		Date of Receipt M / D / Y 07 / 31 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4602
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.09
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies, clipbds
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 662.92	

SUBTOTAL of Receipts This Page (optional)	57.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rutliff B. Perkins		Date of Receipt M / D / Y 08 / 08 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4607
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.55
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 664.47	

Full Name (Last, First, Middle Initial) B. Rutliff B. Perkins		Date of Receipt M / D / Y 08 / 08 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4608
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.88
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 735.35	

Full Name (Last, First, Middle Initial) C. Rutliff B. Perkins		Date of Receipt M / D / Y 08 / 13 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4609
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 86.90
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 822.25	

SUBTOTAL of Receipts This Page (optional)	159.33
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 08 / 22 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4610
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.13
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 830.38	

Full Name (Last, First, Middle Initial) B. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 09 / 02 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4611
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.72
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) clip-boards
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 854.10	

Full Name (Last, First, Middle Initial) C. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 09 / 10 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4612
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.48
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) paper
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 864.58	

SUBTOTAL of Receipts This Page (optional)	42.33
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 09 / 16 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4603
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.73
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) clip-boards
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 878.31	

Full Name (Last, First, Middle Initial) B. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 09 / 20 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4604
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.72
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) clips
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 881.03	

Full Name (Last, First, Middle Initial) C. Rutlous B. Perkins		Date of Receipt M / D / Y Y Y Y 09 / 22 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4605
City	State	Zip Code
Athol	MA	01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.68
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) copies
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 919.69	

SUBTOTAL of Receipts This Page (optional)	55.11
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 35

(check only one)

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

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)
Swing the Vote

Full Name (Last, First, Middle Initial) A. Rufius B. Perkins		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address 93 Pinedale Rd		Transaction ID: SA11A1.4613
City Athol	State MA	Zip Code 01331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.15
Name of Employer HAP, Inc.	Occupation Attorney	(IN-KIND) use of voice mail-3 months
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1024.84	

SUBTOTAL of Receipts This Page (optional)	▶	105.15
TOTAL This Period (last page this line number only)	▶	1740.57

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote		FEC IDENTIFICATION NUMBER C C00401919
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Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Maureen Blasco	Date M / D / Y 07 / 28 / 2004
Mailing Address 67 Norcross Rd	Amount 4.99
City State Zip Code Royalston MA 01368	Transaction ID: SE24.4109
Purpose of Expenditure (in-kind) office supplies Category/Type 003	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: George Bush	Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>
Calendar Year-To-Date Per Election for Office Sought 1016.86	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____

Full Name (Last, First, Middle, Initial) of Payee Maureen Blasco	Date M / D / Y 08 / 02 / 2004
Mailing Address 67 Norcross Rd	Amount 37.00
City State Zip Code Royalston MA 01368	Transaction ID: SE24.4105
Purpose of Expenditure (in-kind) postage Category/Type 003	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: George Bush	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1121.28	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	41.99
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature _____	Date M / D / Y _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
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Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Maureen Blasco Mailing Address 67 Norcross Rd City State Zip Code Royalston MA 01368 Purpose of Expenditure Postage \$74, Office supplies \$28.31 Category/Type 003 Name of Federal Candidate supported or Opposed by expenditure: George Bush Calendar Year-To-Date Per Election for Office Sought 1584.20	Date M M / D D / Y Y Y Y 08 / 31 / 2004 Amount 102.31 Transaction ID: SE24.4106 Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____
--	--

Full Name (Last, First, Middle, Initial) of Payee Bart Bourcius Mailing Address 42 Mountain View Rd City State Zip Code Amherst MA 01002 Purpose of Expenditure paper Category/Type 006 Name of Federal Candidate supported or Opposed by expenditure: George Bush Calendar Year-To-Date Per Election for Office Sought 806.88	Date M M / D D / Y Y Y Y 07 / 02 / 2004 Amount 22.03 Transaction ID: SE24.4116 Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential Check One: Support <input checked="" type="checkbox"/> Oppose Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____
---	--

(a) SUBTOTAL of Itemized Independent Expenditures	124.34
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature _____	Date M M / J J / Y Y Y Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Bert Bourdus			Date M / D / Y 09 / 30 / 2004		
Mailing Address 42 Mountain View Rd			Amount 256.13		
City Amherst	State MA	Zip Code 01002	Transaction ID: SE24.4110		
Purpose of Expenditure paper & Toner		Category/ Type 006	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 2453.93			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Leah Anne Brown			Date M / D / Y 07 / 25 / 2004		
Mailing Address 16 Cedar St			Amount 11.03		
City Roxbury	State MA	Zip Code 02119	Transaction ID: SE24.4110		
Purpose of Expenditure (in-kind) copies		Category/ Type 006	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1011.87			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	267.16
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
_____ Signature	Date M / D / Y _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Leah Anne Brown			Date M / D / Y 08 / 01 / 2004		
Mailing Address 16 Cedar St			Amount 28.33		
City Roxbury	State MA	Zip Code 02119	Transaction ID: SE24.4111		
Purpose of Expenditure (in-kind) office & computer supplies		Category/Type 006	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1084.28			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Leah Anne Brown			Date M / D / Y 08 / 03 / 2004		
Mailing Address 16 Cedar St			Amount 22.93		
City Roxbury	State MA	Zip Code 02119	Transaction ID: SE24.4112		
Purpose of Expenditure (in-kind) clip-boards		Category/Type 007	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1270.10			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	51.26
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____ / _____ / _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Leah Anne Brown			Date M / D / Y 09 / 30 / 2004		
Mailing Address 16 Cedar St			Amount 209.98		
City Roxbury	State MA	Zip Code 02119	Transaction ID: SE24.4113		
Purpose of Expenditure printer		Category/ Type 001	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1944.22			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Leah Anne Brown			Date M / D / Y 09 / 30 / 2004		
Mailing Address 16 Cedar St			Amount 129.39		
City Roxbury	State MA	Zip Code 02119	Transaction ID: SE24.4114		
Purpose of Expenditure Paper & Toner		Category/ Type 006	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 2073.61			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	339.37
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y ____ / ____ / ____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Leah Anna Brown			Date M / D / Y 09 / 30 / 2004		
Mailing Address 16 Cedar St			Amount 124.19		
City Roxbury	State MA	Zip Code 02119	Transaction ID: SE24.4115		
Purpose of Expenditure paper & Toner		Category/ Type 006	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 2197.80			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Bonnie Carroll			Date M / D / Y 07 / 15 / 2004		
Mailing Address 147 MacLean Rd			Amount 25.00		
City Alstead	State NH	Zip Code 03802	Transaction ID: SE24.4123		
Purpose of Expenditure (in-kind) voter list		Category/ Type 007	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 939.82			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	149.19
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____ / _____ / _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full)
Swing the Vote

FED IDENTIFICATION NUMBER
C C00401919

Check if 24-hour notice 48-hour notice

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

Date
M / D / Y
07 / 23 / 2004

Mailing Address
147 MacLean Rd

Amount
15.37

City State Zip Code
Alstead NH 03602

Transaction ID: SE24.4121
Office Sought: House State: _____
Senate District: _____
 Presidential

Purpose of Expenditure (in-kind) copies & clip-boards
Category/Type 006

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 983.67

Disbursement For: Primary General 2004
Other (specify): _____

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

Date
M / D / Y
07 / 01 / 2004

Mailing Address
93 Pinedale Rd

Amount
88.71

City State Zip Code
Athol MA 01331

Transaction ID: SE24.4124
Office Sought: House State: _____
Senate District: _____
 Presidential

Purpose of Expenditure (in-kind) Paper & copies
Category/Type 006

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 784.85

Disbursement For: Primary General 2004
Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	104.08
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date M / D / Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 07 / 03 / 2004		
Mailing Address 93 Pinedale Rd			Amount 74.24		
City Athol		State MA	Transaction ID: SE24.4126		
Zip Code 01331		Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>	
Purpose of Expenditure (in-kind) copies Category/Type 006			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Calendar Year-To-Date Per Election for Office Sought 881.12		

Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 07 / 14 / 2004		
Mailing Address 93 Pinedale Rd			Amount 33.70		
City Athol		State MA	Transaction ID: SE24.4127		
Zip Code 01331		Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>	
Purpose of Expenditure (in-kind) supplies & copies Category/Type 007			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Calendar Year-To-Date Per Election for Office Sought 914.82		

(a) SUBTOTAL of Itemized Independent Expenditures	107.94
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____ / _____ / _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice	<input type="checkbox"/> 48-hour notice		Date		
Full Name (Last, First, Middle, Initial) of Payee Rutilious Perkins			M / D / Y	7 / 17 / 2004	
Mailing Address 93 Pinedale Rd			Amount	12.92	
City Athol	State MA	Zip Code 01331	Transaction ID: SE24.4130		
Purpose of Expenditure (in-kind) copies			Office Sought:	House	State: _____
				Senate	District: _____
				<input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One:	Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought			Disbursement For:	Primary	<input checked="" type="checkbox"/> General 2004
			Other (specify): _____		
Amount			966.66		

Full Name (Last, First, Middle, Initial) of Payee Rutilious Perkins			Date		
Mailing Address 93 Pinedale Rd			M / D / Y	7 / 19 / 2004	
Amount			Amount	1.64	
City Athol	State MA	Zip Code 01331	Transaction ID: SE24.4131		
Purpose of Expenditure (in-kind) copies			Office Sought:	House	State: _____
				Senate	District: _____
				<input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One:	Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought			Disbursement For:	Primary	<input checked="" type="checkbox"/> General 2004
			Other (specify): _____		
Amount			968.30		

(a) SUBTOTAL of Itemized Independent Expenditures	14.56
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature _____	Date M / D / Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 07 / 23 / 2004		
Mailing Address 93 Pinedale Rd			Amount 17.17		
City Athol		State MA	Zip Code 01331		Transaction ID: SE24.4132
Purpose of Expenditure (in-kind) clip-boards			Category/ Type 007		Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought			1000.84		Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____

Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 07 / 31 / 2004		
Mailing Address 93 Pinedale Rd			Amount 17.34		
City Athol		State MA	Zip Code 01331		Transaction ID: SE24.4134
Purpose of Expenditure (in-kind) clip-boards			Category/ Type 007		Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought			1034.20		Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	34.51
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full)
Swing the Vote

FED IDENTIFICATION NUMBER
C C00401919

Check if 24-hour notice 48-hour notice

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

Date
M M / D D / Y Y Y Y
08 / 09 / 2004

Mailing Address
93 Pinedale Rd

Amount
70.88

City State Zip Code
Athol MA 01331

Transaction ID: SE24.4143
Office Sought: House State: _____
Senate District: _____
 Presidential

Purpose of Expenditure (in-kind) copies
Category/Type 007

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 1386.86

Disbursement For: Primary General 2004
Other (specify): _____

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

Date
M M / D D / Y Y Y Y
08 / 13 / 2004

Mailing Address
93 Pinedale Rd

Amount
86.90

City State Zip Code
Athol MA 01331

Transaction ID: SE24.4144
Office Sought: House State: _____
Senate District: _____
 Presidential

Purpose of Expenditure (in-kind) copies
Category/Type 007

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 1473.76

Disbursement For: Primary General 2004
Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	157.78
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

Date

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full)
Swing the Vote

FED IDENTIFICATION NUMBER
C C00401919

Check if 24-hour notice 48-hour notice

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

Date
M / D / Y
08 / 22 / 2004

Mailing Address
93 Pinedale Rd

Amount
8.13

City State Zip Code
Athol MA 01331

Transaction ID: SE24.4145
Office Sought: House State: _____
Senate District: _____
 Presidential

Purpose of Expenditure (in-kind) copies
Category/Type 007

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 1481.89

Disbursement For: Primary General 2004
Other (specify): _____

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

Date
M / D / Y
08 / 02 / 2004

Mailing Address
93 Pinedale Rd

Amount
23.72

City State Zip Code
Athol MA 01331

Transaction ID: SE24.4146
Office Sought: House State: _____
Senate District: _____
 Presidential

Purpose of Expenditure (in-kind) clip-boards
Category/Type 007

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 1607.92

Disbursement For: Primary General 2004
Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	31.85
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date M / D / Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full)
Swing the Vote

FED IDENTIFICATION NUMBER
C C00401919

Check if 24-hour notice	48-hour notice
Full Name (Last, First, Middle, Initial) of Payee Rutilius Perkins	
Mailing Address 93 Pinedale Rd	
City Athol	State MA
Zip Code 01331	
Purpose of Expenditure (in-kind) paper	Category/ Type 006
Name of Federal Candidate supported or Opposed by expenditure: George Bush	
Calendar Year-To-Date Per Election for Office Sought	1618.40

Date
M M / D D / Y Y Y Y
09 / 10 / 2004

Amount
10.48

Transaction ID: SE24.4147

Office Sought: House State: _____
Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
Other (specify): _____

Full Name (Last, First, Middle, Initial) of Payee Rutilius Perkins	
Mailing Address 93 Pinedale Rd	
City Athol	State MA
Zip Code 01331	
Purpose of Expenditure (in-kind) clip-boards	Category/ Type 007
Name of Federal Candidate supported or Opposed by expenditure: George Bush	
Calendar Year-To-Date Per Election for Office Sought	1671.63

Date
M M / D D / Y Y Y Y
09 / 10 / 2004

Amount
13.73

Transaction ID: SE24.4138

Office Sought: House State: _____
Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	24.21
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date M M / D D / Y Y Y Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 09 / 20 / 2004		
Mailing Address 93 Pinedale Rd			Amount 2.72		
City Athol	State MA	Zip Code 01331	Transaction ID: SE24.4139		
Purpose of Expenditure (in-kind) binder cli- ps		Category/ Type 007	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1674.35			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 09 / 22 / 2004		
Mailing Address 93 Pinedale Rd			Amount 38.66		
City Athol	State MA	Zip Code 01331	Transaction ID: SE24.4140		
Purpose of Expenditure (in-kind) copies S21- .22, supplies 17.44		Category/ Type 007	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1713.01			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	41.38
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____ / _____ / _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee Rutillus Perkins			Date M / D / Y 09 / 30 / 2004		
Mailing Address 93 Pinedale Rd			Amount 105.15		
City Athol		State MA	Zip Code 01331		Transaction ID: SE24.4140
Purpose of Expenditure (in-kind) use of voice mail, 3 months			Category/Type 001		Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 2559.08			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Staples			Date M / D / Y 08 / 02 / 2004		
Mailing Address			Amount 88.89		
City Gardner		State MA	Zip Code		Transaction ID: SE24.4152
Purpose of Expenditure copies \$88.89, pens \$8.38			Category/Type 007		Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought 1210.17			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	194.04
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____ / _____ / _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice	<input type="checkbox"/> 48-hour notice		Date		
Full Name (Last, First, Middle, Initial) of Payee Staples			M / D / Y	08 / 03 / 2004	
Mailing Address			Amount	44.33	
City Gardner	State MA	Zip Code	Transaction ID: SE24.4155		
Purpose of Expenditure copies		Category/ Type	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought		1314.43	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

Full Name (Last, First, Middle, Initial) of Payee Staples			Date		
Mailing Address			M / D / Y	08 / 27 / 2004	
Amount			21.23		
City Gardner	State MA	Zip Code	Transaction ID: SE24.4156		
Purpose of Expenditure copies		Category/ Type	Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought		1734.24	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		

(a) SUBTOTAL of Itemized Independent Expenditures	65.56
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Swing the Vote			FEC IDENTIFICATION NUMBER C C00401919		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice Full Name (Last, First, Middle, Initial) of Payee US Postal Service			Date M / D / Y 08 / 02 / 2004		
Mailing Address			Amount 37.00		
City State Zip Code			Transaction ID: SE24.4157		
Purpose of Expenditure postage			Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		
Calendar Year-To-Date Per Election for Office Sought			1247.17		

Full Name (Last, First, Middle, Initial) of Payee Verizon			Date M / D / Y 08 / 30 / 2004		
Mailing Address P.O. Box 1			Amount 133.44		
City State Zip Code Worcester MA 01854-0001			Transaction ID: SE24.4158		
Purpose of Expenditure Voice mail, including installation fees			Office Sought: House State: _____ Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Name of Federal Candidate supported or Opposed by expenditure: George Bush			Check One: Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> 2004 Other (specify): _____		
Calendar Year-To-Date Per Election for Office Sought			2746.41		

(a) SUBTOTAL of Itemized Independent Expenditures	170.44
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature	Date M / D / Y _____

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full)
Swing the Vote

FEC IDENTIFICATION NUMBER
C C00401919

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee
Miryam Ehrlich Williamson

Date
M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 4

Mailing Address
162 Old Winchester Rd

Amount
39.50

City State Zip Code
Warwick MA 01378

Transaction ID: SE24.4149

Purpose of Expenditure
software for canvass list prep

Office Sought: House State: _____
Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1657.90

Disbursement For: Primary General 2004
Other (specify): _____

Full Name (Last, First, Middle, Initial) of Payee
Miryam Ehrlich Williamson

Date
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 4

Mailing Address
162 Old Winchester Rd

Amount
53.89

City State Zip Code
Warwick MA 01378

Transaction ID: SE24.4151

Purpose of Expenditure
office supplies

Office Sought: House State: _____
Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
George Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2612.97

Disbursement For: Primary General 2004
Other (specify): _____

(a) SUBTOTAL of Itemized Independent Expenditures	93.39
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	2050.27

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date M M / J J / Y Y Y Y

Signature