

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 90

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc		2. IDENTIFICATION NUMBER C00431379
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO Box 270701		
CITY, STATE, and ZIP CODE West Hartford CT 06127		3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General

4. TYPE OF REPORT (Check here if this is a Termination Report.)

April 15 Quarterly Report February 20 June 20 October 20
 July 15 Quarterly Report March 20 July 20 November 20
 October 15 Quarterly Report April 20 August 20 December 20
 January 31 Year End Report May 20 September 20 January 31

Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on _____
on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 09/01/2008	THROUGH 09/30/2008
---------------------------	---------------------------	------------------------------

SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	967844.72	
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	3861.14	
8. SUBTOTAL (Lines 6 and 7)	971705.86	
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	455735.67	
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	515970.19	
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00	
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	431764.39	
13. EXPENDITURES SUBJECT TO LIMITATION	15118615.03	
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	9457628.20	
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	15119155.03	

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 Kathryn Damato	Date 10/20/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact: Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 3P (01/2001)
---	--	--

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

2 / 90

(PAGE 2, FEC FORM 3P)

Name of committee (in full) Chris Dodd For President Inc		Report Covering the Period From: 09/01/2008 To: 09/30/2008	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)		0.00	1961741.71
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees		30.00	10084030.20
(b) Political Party Committees		0.00	100.00
(c) Other Political Committees		0.00	745698.30
(d) The Candidate		0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		30.00	10829828.50
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	4739005.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate		0.00	0.00
(b) Other Loans		0.00	1302811.25
(c) TOTAL LOANS (Add 19(a) and 19(b))		0.00	1302811.25
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating		3531.14	81904.44
(b) Fundraising		300.00	540.00
(c) Legal and Accounting		0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		3831.14	82444.44
21. OTHER RECEIPTS (Dividend, Interest, etc.)		0.00	55536.06
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)		3861.14	18971366.96
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES		10625.67	15201059.47
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		440110.00	440110.00
25. FUNDRAISING DISBURSEMENTS		0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate		0.00	0.00
(b) Other Repayments		0.00	1447568.29
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		0.00	1447568.29
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees		0.00	1194942.00
(b) Political Party Committees		5000.00	177258.30
(c) Other Political Committees		0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))		5000.00	1372200.30
29. OTHER DISBURSEMENTS		0.00	6000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		455735.67	18466938.06
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)		0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

3 / 90

1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc					
ADDRESS (number and street) PO Box 270701					
CITY, STATE, and ZIP CODE West Hartford CT 06127			2. IDENTIFICATION NUMBER C00431379		

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	699716.51
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	2634497.72	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	68.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	3366269.45

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4 / 90
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Elizabeth Ainslie		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2008	
Mailing Address 300 Crescent Court 18th Floor City State Zip Code Dallas TX 75201-1836		Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		Redesignation to FOCD [MEMO ITEM]	
Name of Employer Self Employed	Occupation Interior Designer	Transaction ID: A24B478D258C742BB8BB	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Lee Ainslie		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2008	
Mailing Address 300 Crescent Court 18th Floor City State Zip Code Dallas TX 75201		Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		Redesignation to FOCD [MEMO ITEM]	
Name of Employer Maverick Capital	Occupation Managing Partner	Transaction ID: A56EA761F828D4952A40	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Peter B. Carey		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2008	
Mailing Address 11 S Lasalle St. Suite 1600 City State Zip Code Chicago IL 60603-1215		Amount of Each Receipt this Period -1000.00	
FEC ID number of contributing federal political committee.		Redesignation to FOCD [MEMO ITEM]	
Name of Employer Self Employed	Occupation Attorney	Transaction ID: A76A16332AC764196BD7	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		

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

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 90
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Mr. David T Chase	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 225 Asylum Street 29th Floor	Amount of Each Receipt this Period -200.00
	City State Zip Code Hartford CT 06103	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A7D10E3F38B9E4CF1B59
	Name of Employer Occupation Chase Enterprises Businessman	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) Craig Cogut	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 99 River Road	Amount of Each Receipt this Period -2300.00
	City State Zip Code Cos Cob CT 06807-2514	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: AED78CB1BE0EB4E589F6
	Name of Employer Occupation Pegasus Investors PE Investor	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) Deborah Cogut	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 99 River Road	Amount of Each Receipt this Period -2300.00
	City State Zip Code Cos Cob CT 06807-2514	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A275964C4ABFD436E8C8
	Name of Employer Occupation N/A Homemaker	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 90
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Sen. Christopher J Dodd	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address C/O Chris Dodd for President P.O. Box 51882	Amount of Each Receipt this Period -2300.00
	City State Zip Code Washington DC 20091	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A7790E4D6594646F39C3
	Name of Employer Occupation U.S. Federal Government Senator	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Jackie Clegg Dodd	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address C/O Chris Dodd for President P.O. Box 51882	Amount of Each Receipt this Period -2300.00
	City State Zip Code Washington DC 20091	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A3033E6B82F204256B25
	Name of Employer Occupation N/A Homemaker	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael Douglas	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 100 Universal City Plaza Building 1320-3A	Amount of Each Receipt this Period -2300.00
	City State Zip Code Universal City CA 91608-1002	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A3F394E1F95DA458790F
	Name of Employer Occupation Self Employed Actor	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 90
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Mr. Edward R Downe, Jr. Mailing Address 1133 Park Avenue City State Zip Code New York NY 10128-1246 FEC ID number of contributing federal political committee.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	8													
Name of Employer Self Employed Occupation Investor Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00		Amount of Each Receipt this Period -2300.00 Redesignation to FOCD [MEMO ITEM] Transaction ID: A9D1A47FD4AB947B1918																				

B. Full Name (Last, First, Middle Initial) Mrs. Eva Dubin Mailing Address C/o Highbridge Capital Management 9 West 5th Street City State Zip Code New York NY 10019 FEC ID number of contributing federal political committee.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	8													
Name of Employer N/A Occupation Homemaker Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00		Amount of Each Receipt this Period -200.00 Redesignation to FOCD [MEMO ITEM] Transaction ID: AECDF987981124ADABD7																				

C. Full Name (Last, First, Middle Initial) Anne Finucane Mailing Address 20 Trapelo Road City State Zip Code Lincoln MA 01773-2004 FEC ID number of contributing federal political committee.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	8													
Name of Employer Bank of America Occupation Executive Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00		Amount of Each Receipt this Period -2300.00 Redesignation to FOCD [MEMO ITEM] Transaction ID: AE8130C2F3C26491FB6C																				

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 90
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Mr. John G. Gaine		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	
Mailing Address 2025 M Street NW Suite 800		Amount of Each Receipt this Period -2300.00	
City State Zip Code Washington DC 20036-2422		Redesignation to FOCD [MEMO ITEM]	
FEC ID number of contributing federal political committee.		Transaction ID: A803A8A42DB4449BE8FD	
Name of Employer Managed Funds Association		Occupation President	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Michael F. Goss		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	
Mailing Address 3 Compo Parkway		Amount of Each Receipt this Period -2300.00	
City State Zip Code Westport CT 06880-6507		Redesignation to FOCD [MEMO ITEM]	
FEC ID number of contributing federal political committee.		Transaction ID: AF36DBAB9070342829E6	
Name of Employer Bain Capital		Occupation Executive	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Beverly A Halpin		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	
Mailing Address PO Box 338		Amount of Each Receipt this Period -2300.00	
City State Zip Code Moose WY 83012-0338		Redesignation to FOCD [MEMO ITEM]	
FEC ID number of contributing federal political committee.		Transaction ID: A59F01991D5504BA58CC	
Name of Employer Lost Creek Ranch		Occupation Manager	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 90
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Mr. Jack D. Hidary	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 303 S. Broadway Suite 105	Amount of Each Receipt this Period -2300.00
	City State Zip Code Tarrytown NY 10591-5410	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A005250D9767742BBBAF
	Name of Employer Self Employed Occupation Investor Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) Mr. Michael Hidary	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 1842 E 3rd St	Amount of Each Receipt this Period -2300.00
	City State Zip Code Brooklyn NY 11223-1937	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: AD4627744C0AB45E5AA8
	Name of Employer Self Employed Occupation Sales Management Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) Charles Kaman	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 43 Prattling Pond Road	Amount of Each Receipt this Period -2300.00
	City State Zip Code Farmington CT 06032-1803	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A452EA05ECCC7481F806
	Name of Employer N/A Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 90
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Roberta Kaman	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 43 Prattling Pond Road	Amount of Each Receipt this Period -2300.00
	City State Zip Code Farmington CT 06032-1803	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A33538326C4AA481B873
	Name of Employer Occupation Fidelco Guide Dog Foundat- Chairman ion Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) Mr. Thomas L. Kempner, Jr.	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 123 East 73rd Street	Amount of Each Receipt this Period -2300.00
	City State Zip Code New York NY 10021-3502	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A3B6272A046934FDE98C
	Name of Employer Occupation Davidson Kempner Capital Investment Manager Management Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Elizabeth H Lowe	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 709 Latimer Road	Amount of Each Receipt this Period -2300.00
	City State Zip Code Santa Monica CA 90402	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A399B7AE41EF1488D8A4
	Name of Employer Occupation N/A Homemaker Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 90
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Mr. Brian T. Moynihan	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 100 Federal Street	Amount of Each Receipt this Period -2000.00
	City State Zip Code Boston MA 02110-1812	
	FEC ID number of contributing federal political committee.	Redesignation to FOCD [MEMO ITEM]
	Name of Employer Bank of America	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	
		Transaction ID: A44AADF89028947A78EC

B.	Full Name (Last, First, Middle Initial) Madalyn Paige Nassetta	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 2904 North Dinwiddie St	Amount of Each Receipt this Period -2300.00
	City State Zip Code Arlington VA 22207-2751	
	FEC ID number of contributing federal political committee.	Redesignation to FOCD [MEMO ITEM]
	Name of Employer N/A	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	
		Transaction ID: A04BB01CBF532494F89D

C.	Full Name (Last, First, Middle Initial) Mr. Peter A Nussbaum	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 29 Dogwood Lane	Amount of Each Receipt this Period -2300.00
	City State Zip Code Westport CT 06880-5022	
	FEC ID number of contributing federal political committee.	Redesignation to FOCD [MEMO ITEM]
	Name of Employer SAC Capital	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	
		Transaction ID: A1CB68ACE6FFF43FBA3F

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 90
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Mr. Joseph D. O'Neill	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 6448 Brookes Lane	Amount of Each Receipt this Period -2300.00
	City State Zip Code Bethesda MD 20816-2505	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A889E187CD45D4C99815
	Name of Employer: Public Strategies Washington Occupation: President & CEO Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey J. Peck	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 5900 Cromwell Dr	Amount of Each Receipt this Period -2300.00
	City State Zip Code Bethesda MD 20816	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A87C2291A5311456CB1F
	Name of Employer: Johnson Madigan & Peck Occupation: Lobbyist Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth Reels	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address P.O. Box 3380	Amount of Each Receipt this Period -2300.00
	City State Zip Code Mashantucket CT 06338-3380	Redesignation to FOCD [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: A65FF326C4F6145EB83C
	Name of Employer: Mashantucket Pequot Tribe Occupation: Tribal Vice Chairman Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 90
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Roger W Sant		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	
Mailing Address 2929 N St. NW		Amount of Each Receipt this Period -700.00	
City State Zip Code Washington DC 20007-3342	FEC ID number of contributing federal political committee.		
Name of Employer Occupation N/A Retired	Redesignation to FOCD [MEMO ITEM]		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		
		Transaction ID: AF0BD4B810E214D4DA36	

B. Full Name (Last, First, Middle Initial) Mr. Mark Scheinberg		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	
Mailing Address 745 Burnside Ave.		Amount of Each Receipt this Period -200.00	
City State Zip Code East Hartford CT 06108-2705	FEC ID number of contributing federal political committee.		
Name of Employer Occupation Goodwin College President	Redesignation to FOCD [MEMO ITEM]		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		
		Transaction ID: ACC575959ADB3447C8FB	

C. Full Name (Last, First, Middle Initial) Ed Welden, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	
Mailing Address 1103 South 21st Street		Amount of Each Receipt this Period -2300.00	
City State Zip Code Birmingham AL 35205-2809	FEC ID number of contributing federal political committee.		
Name of Employer Occupation Southeast Property Management Owner	Redesignation to FOCD [MEMO ITEM]		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		
		Transaction ID: A4283A573F0034388845	

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 90
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) n/a Unitemized Donors	Date of Receipt
	Mailing Address	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text"/> 30.00
	Name of Employer Occupation	Unitemized Donors
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 30.00	Transaction ID: U6DBAB3104EA541B0BFB

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 30.00
TOTAL This Period (last page this line number only)	<input type="text"/> 30.00

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 90
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Record Printing & Copy Center	Date of Receipt
	Mailing Address 1117 Villa Avenue	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Sioux City IA 51102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text"/> 2731.14
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 2731.14

Transaction ID: A03C9B1C4D62540A79C8

B.	Full Name (Last, First, Middle Initial) Mr. Vincent Frillici	Date of Receipt
	Mailing Address 1100 H St., Ste.940 NW	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Washington DC 20005-5476	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text"/> 800.00
	Name of Employer Occupation Chris Dodd for President Finance Director Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 931.99

Transaction ID: A31F794296AE14401913

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3531.14
TOTAL This Period (last page this line number only)	<input type="text"/> 3531.14

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 90
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Christine Damato	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 19 Paxton Road	Amount of Each Receipt this Period 300.00
	City State Zip Code West Hartford CT 06107-3325	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Occupation Information Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	Transaction ID: A3D289A71A99647759B8

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD86F8E1537E34DB99F3</p> <p>Date of Disbursement 09 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 120.80</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BBA51400BB0EC4FB0BE0</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 70.34</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield</p> <p>Mailing Address 370 Bassett Road</p> <p>City North Haven State CT Zip Code 06473-4201</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF8E999EAA2E84FE58A7</p> <p>Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 630.68</p>

SUBTOTAL of Disbursements This Page (optional) ▶

821.82

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 90

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

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB6FFE95805AB47BC97E Date of Disbursement 09 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 129.17
B.	Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B582BA5F647F74300BB7 Date of Disbursement 09 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 178.75
C.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1F6C8EEEE90B4626945 Date of Disbursement 09 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 934.26

SUBTOTAL of Disbursements This Page (optional) ▶

1242.18

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 90

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

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1F8943DBF7AB4102B59 Date of Disbursement 09 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1314.68
B.	Full Name (Last, First, Middle Initial) Petty Cash <hr/> Mailing Address P.O. Box 270701 <hr/> City West Hartford State CT Zip Code 06127 <hr/> Purpose of Disbursement Taxi, mileage reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B30493BC4C13C419EB53 Date of Disbursement 09 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 350.00
C.	Full Name (Last, First, Middle Initial) Postmaster - West Hartford <hr/> Mailing Address 102 LaSalle Road <hr/> City West Hartford State CT Zip Code 06107 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0A517FE62D764063953 Date of Disbursement 09 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 294.00

SUBTOTAL of Disbursements This Page (optional) ▶

1958.68

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 90

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

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)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Des Moines Embassy Club</p> <p>Mailing Address 801 Grand Avenue Suite 4000</p> <p>City Des Moines State IA Zip Code 50309-2762</p> <p>Purpose of Disbursement Finance Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD4E3CFFCD54D4F15A86</p> <p>Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 182.55</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) The Liberty Hotel</p> <p>Mailing Address 215 Charles Street</p> <p>City Boston State MA Zip Code 02114-3001</p> <p>Purpose of Disbursement Lodging & Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B60283CD1B4C34FF9A78</p> <p>Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 407.14</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address 8808 Irvine Center Drive</p> <p>City Irvine State CA Zip Code 92618-4201</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BEAE29E47255E42109A6</p> <p>Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 280.55</p>

SUBTOTAL of Disbursements This Page (optional) ▶

870.24

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 90

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

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Verizon Mailing Address 8808 Irvine Center Drive City Irvine State CA Zip Code 92618-4201 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B4746CAE23A404429AF7 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8 Amount of Each Disbursement this Period 142.16
B.	Full Name (Last, First, Middle Initial) Verizon Mailing Address 8808 Irvine Center Drive City Irvine State CA Zip Code 92618-4201 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9606C13CE97E4067AF9 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8 Amount of Each Disbursement this Period 188.43
C.	Full Name (Last, First, Middle Initial) Kathryn Damato Mailing Address 10 Blackhawk Lane City West Hartford State CT Zip Code 06117 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1EAAD21C305C4B40AD1 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 1896.95

SUBTOTAL of Disbursements This Page (optional) ▶	2227.54
TOTAL This Period (last page this line number only) ▶	[Empty Box]

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 90

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

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Kathryn Damato Mailing Address 10 Blackhawk Lane City West Hartford State CT Zip Code 06117 Purpose of Disbursement Reimb of trael expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B3866FFB30E8244AEB9D Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8 Amount of Each Disbursement this Period 380.14
B.	Full Name (Last, First, Middle Initial) Kathryn Damato Mailing Address 10 Blackhawk Lane City West Hartford State CT Zip Code 06117 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0046D485E1B644CC98B Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 1896.96
C.	Full Name (Last, First, Middle Initial) Emily Fetting Mailing Address 513 Independence Avenue SE City Washington State DC Zip Code 20003-1144 Purpose of Disbursement Reimbursement on cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B76C2489DA3DF429FB1D Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 8 Amount of Each Disbursement this Period 113.35

SUBTOTAL of Disbursements This Page (optional) ▶

2390.45

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 90

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

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)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Ms. Euginia Gluzberg

Mailing Address 1380 Paradise Avenue

City Hamden State CT Zip Code 06514-1017

Purpose of Disbursement
Hourly Compliance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B9A84BBE9B15B4ABA8B1

Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

1114.76

SUBTOTAL of Disbursements This Page (optional)

1114.76

TOTAL This Period (last page this line number only)

10625.67

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Friends of Chris Dodd

Transaction ID: B60D0AFA006614734A17
Date of Disbursement

Mailing Address PO BOX 270701

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

City State Zip Code
West Hartford CT 06127

Amount of Each Disbursement this Period

351210.00

Purpose of Disbursement
Transfer

--

Candidate Name
Friends of Chris Dodd

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Friends of Chris Dodd

Transaction ID: BC2F45B62A0DE4E16861
Date of Disbursement

Mailing Address PO BOX 270701

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

City State Zip Code
West Hartford CT 06127

Amount of Each Disbursement this Period

88900.00

Purpose of Disbursement
Transfer

--

Candidate Name
Friends of Chris Dodd

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

440110.00

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

440110.00

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 90

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

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)
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Countrywide PAC			Transaction ID: B8B72B7D1E7194A8C98B	
	Mailing Address 1717 Pennsylvania Avenue NW Suite 625			Date of Disbursement 09 / 21 / 2008	
	City Washington	State DC	Zip Code 20006	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Refund			Category/ Type	
	Candidate Name Countrywide PAC				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State:	District:			

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

5000.00

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 / 90
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC	Nature of Debt (Purpose): Printing
Mailing Address 1101 Penn Avenue	
City State ZIP Code Scranton PA 18509	

Outstanding Balance Beginning This Period 2327.31	Transaction ID: D0A1C9B9020DA4F7F9B3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2327.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC	Nature of Debt (Purpose): Printing
Mailing Address 1101 Penn Avenue	
City State ZIP Code Scranton PA 18509	

Outstanding Balance Beginning This Period 411.45	Transaction ID: D0B46426F11F0465B888	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 411.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC	Nature of Debt (Purpose): Printing
Mailing Address 1101 Penn Avenue	
City State ZIP Code Scranton PA 18509	

Outstanding Balance Beginning This Period 348.36	Transaction ID: D68AD64DCDC624C69A94	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 348.36

1) SUBTOTALS This Period This Page (optional).....	3087.12
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc.			Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road			
City Fairfield	State CT	ZIP Code 06824	

Outstanding Balance Beginning This Period 500.00		Transaction ID: D018D6F8488CD4328B41	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Immediacy Group			Nature of Debt (Purpose): Television
Mailing Address 1800 S Street			
City Washington	State DC	ZIP Code 20009	

Outstanding Balance Beginning This Period 45000.00		Transaction ID: D4C86C8799F3445D78A5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Immediacy Group			Nature of Debt (Purpose): Television
Mailing Address 1800 S Street			
City Washington	State DC	ZIP Code 20009	

Outstanding Balance Beginning This Period 65000.00		Transaction ID: D6EC88DE849224213A22	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 65000.00	

1) SUBTOTALS This Period This Page (optional).....	▶	110500.00
2) TOTALS This Period (last page this line number only).....	▶	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	[]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	[]

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Newman and Leventhal Caterers, Inc.			Nature of Debt (Purpose): Caterer
Mailing Address 45 West 81st Street			
City New York	State NY	ZIP Code 10024-6025	

Outstanding Balance Beginning This Period 2136.07		Transaction ID: D2FDEA7A6FB3F461FA7F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2136.07	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing			Nature of Debt (Purpose): Printing
Mailing Address 1739 East Grand Avenue			
City Des Moines	State IA	ZIP Code 50316	

Outstanding Balance Beginning This Period 7233.31		Transaction ID: D3239DDE2C2B14D02B40	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7233.31	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Freeman			Nature of Debt (Purpose): Event Rental
Mailing Address P.O. Box 650036			
City Dallas	State TX	ZIP Code 75265-0036	

Outstanding Balance Beginning This Period 2774.87		Transaction ID: D762D234592FA4797973	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2774.87	

1) SUBTOTALS This Period This Page (optional).....	▶	12144.25
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1101 Penn Avenue			
City Scranton	State PA	ZIP Code 18509	

Outstanding Balance Beginning This Period 485.08		Transaction ID: DC5C4695FC2C6478F875	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 485.08	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC			Nature of Debt (Purpose): Printing
Mailing Address 1101 Penn Avenue			
City Scranton	State PA	ZIP Code 18509	

Outstanding Balance Beginning This Period 3708.25		Transaction ID: D89306888B7864931B8A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3708.25	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hinckley Springs			Nature of Debt (Purpose): Water Cooler Services
Mailing Address P.O. Box 660579			
City Dallas	State TX	ZIP Code 75266-0579	

Outstanding Balance Beginning This Period 296.68		Transaction ID: DFD07531348F8439BA68	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 296.68	

1) SUBTOTALS This Period This Page (optional).....	▶	4490.01
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hinckley Springs			Nature of Debt (Purpose): Water Cooler Services
Mailing Address P.O. Box 660579			
City Dallas	State TX	ZIP Code 75266-0579	

Outstanding Balance Beginning This Period <input type="text" value="306.68"/>		Transaction ID: DE674F26EC06645DDB95	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="306.68"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ExxonMobil			Nature of Debt (Purpose): Gasoline
Mailing Address P.O. Box 688938			
City Des Moines	State IA	ZIP Code 50368-8938	

Outstanding Balance Beginning This Period <input type="text" value="429.36"/>		Transaction ID: D2591D51138CC454BA3F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="429.36"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ExxonMobil			Nature of Debt (Purpose): Gasoline
Mailing Address P.O. Box 688938			
City Des Moines	State IA	ZIP Code 50368-8938	

Outstanding Balance Beginning This Period <input type="text" value="241.86"/>		Transaction ID: D303F42DD72104352BB3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="241.86"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="977.90"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 31 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq	Nature of Debt (Purpose): Telephone						
Mailing Address PO Box 660068							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Dallas</td> <td>TX</td> <td>75266</td> </tr> </table>	City	State	ZIP Code	Dallas	TX	75266	
City	State	ZIP Code					
Dallas	TX	75266					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="378.82"/>	Transaction ID: DF4A4422265684FB29B9						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="378.82"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="378.82"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="378.82"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq	Nature of Debt (Purpose): Telephone						
Mailing Address PO Box 660068							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Dallas</td> <td>TX</td> <td>75266</td> </tr> </table>	City	State	ZIP Code	Dallas	TX	75266	
City	State	ZIP Code					
Dallas	TX	75266					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1064.16"/>	Transaction ID: DBF0B293CD60A40ED8E0						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="1064.16"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1064.16"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1064.16"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telephone						
Mailing Address P.O. Box 8110							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Aurora</td> <td>IL</td> <td>60572</td> </tr> </table>	City	State	ZIP Code	Aurora	IL	60572	
City	State	ZIP Code					
Aurora	IL	60572					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1055.11"/>	Transaction ID: D561E5E0579E7422A8F4						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="1055.11"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1055.11"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1055.11"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="2498.09"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 32 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telephone						
Mailing Address P.O. Box 8110							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Aurora</td> <td>IL</td> <td>60572</td> </tr> </table>	City	State	ZIP Code	Aurora	IL	60572	
City	State	ZIP Code					
Aurora	IL	60572					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="304.30"/>	Transaction ID: DD45DB76A7149485EADE
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="304.30"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telephone						
Mailing Address P.O. Box 8110							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Aurora</td> <td>IL</td> <td>60572</td> </tr> </table>	City	State	ZIP Code	Aurora	IL	60572	
City	State	ZIP Code					
Aurora	IL	60572					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1861.62"/>	Transaction ID: DFE38B3A3574543178FC
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="1861.62"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waste Management	Nature of Debt (Purpose): Utilities						
Mailing Address PO Box 756							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50303</td> </tr> </table>	City	State	ZIP Code	Des Moines	IA	50303	
City	State	ZIP Code					
Des Moines	IA	50303					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="266.02"/>	Transaction ID: D13EE948ED74B4BE0B66
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="266.02"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="2431.94"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 33 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waste Management	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 756	
City State ZIP Code Des Moines IA 50303	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">149.94</div>	Transaction ID: D26D95FA926E146209F5
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">149.94</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">25037.09</div>	Transaction ID: D2550339EB07C40E994D
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">25037.09</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">25233.00</div>	Transaction ID: DDAAD6917DA7140B1B6D
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">25233.00</div>	

1) SUBTOTALS This Period This Page (optional).....	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">50420.03</div>
2) TOTALS This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;"> </div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;"> </div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;"> </div>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 34 / 90
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input type="text" value="25134.72"/>	Transaction ID: D2900156C49674E41A2B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="25134.72"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input type="text" value="20016.20"/>	Transaction ID: D14FCCBCA21B449EB877	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20016.20"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Immediacy Group	Nature of Debt (Purpose): Television
Mailing Address 1800 S Street	
City State ZIP Code Washington DC 20009	

Outstanding Balance Beginning This Period <input type="text" value="50000.00"/>	Transaction ID: DE079EBE7C9854073A8E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50000.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="95150.92"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS			Nature of Debt (Purpose): Shipping
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	ZIP Code 19170	

Outstanding Balance Beginning This Period 434.09		Transaction ID: D93A99FFBC04A4242996	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 434.09	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS			Nature of Debt (Purpose): Shippng
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	ZIP Code 19170	

Outstanding Balance Beginning This Period 126.91		Transaction ID: D46BD2137637F4679A43	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 126.91	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS			Nature of Debt (Purpose): Shipping
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	ZIP Code 19170	

Outstanding Balance Beginning This Period 427.18		Transaction ID: DC7364FE5C9E54CCCA73	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 427.18	

1) SUBTOTALS This Period This Page (optional).....	▶ 988.18
2) TOTALS This Period (last page this line number only).....	▶
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 36 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS	Nature of Debt (Purpose): Shipping						
Mailing Address PO Box 7247-0244							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Philadelphia</td> <td>PA</td> <td>19170</td> </tr> </table>	City	State	ZIP Code	Philadelphia	PA	19170	
City	State	ZIP Code					
Philadelphia	PA	19170					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="60.76"/>	Transaction ID: D6EB2D896D8C64BA8AA9						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="60.76"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="60.76"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="60.76"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedar Rapids Municipal Utilities	Nature of Debt (Purpose): Utilities						
Mailing Address PO Box 3255							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Cedar Rapids</td> <td>IA</td> <td>52406</td> </tr> </table>	City	State	ZIP Code	Cedar Rapids	IA	52406	
City	State	ZIP Code					
Cedar Rapids	IA	52406					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="165.81"/>	Transaction ID: D9457B91CEE0540E8A08						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="165.81"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="165.81"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="165.81"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kilkenney's	Nature of Debt (Purpose): Food & Beverage						
Mailing Address 300 West 3rd Street							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Davenport</td> <td>IA</td> <td>52801-1208</td> </tr> </table>	City	State	ZIP Code	Davenport	IA	52801-1208	
City	State	ZIP Code					
Davenport	IA	52801-1208					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="220.00"/>	Transaction ID: DE9F171102B294984BCD						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="220.00"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="220.00"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="220.00"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="446.57"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cox Communications			Nature of Debt (Purpose): Internet Services
Mailing Address PO Box 6059			
City Cypress	State CA	ZIP Code 90630	

Outstanding Balance Beginning This Period		Transaction ID: DEAEBC41D358C496EAEB	
138.02			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	138.02	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Frontline Productions			Nature of Debt (Purpose): Lighting & Video
Mailing Address 125 Hemlock Drive			
City Deep River	State CT	ZIP Code 06417	

Outstanding Balance Beginning This Period		Transaction ID: DF269F8B8076845BAB94	
885.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	885.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Heartland Flagpoles and Flags			Nature of Debt (Purpose): Flags
Mailing Address 3719 SW 9th Street			
City Des Moines	State IA	ZIP Code 50315	

Outstanding Balance Beginning This Period		Transaction ID: D42D026888D4F47D198F	
436.60			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	436.60	

1) SUBTOTALS This Period This Page (optional).....	▶	1459.62
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 38 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Geoff Luxenberg

Nature of Debt (Purpose):
 Reimbursement for Gas/Payment for signat

Mailing Address 249A New State Road

City State ZIP Code
 Manchester CT 06042-7959

Outstanding Balance Beginning This Period		Transaction ID: D3BEB98490D8F4B87A07	
107.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	107.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 U.S. Express Inc.

Nature of Debt (Purpose):
 Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code
 Landover MD 20785

Outstanding Balance Beginning This Period		Transaction ID: D80871DA60A7642ADAA1	
160.24			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	160.24	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Koch Brothers

Nature of Debt (Purpose):
 Copier

Mailing Address 325 Grand Avenue
 P.O. Box 1755

City State ZIP Code
 Des Moines IA 50306

Outstanding Balance Beginning This Period		Transaction ID: DFAE4308D10124EEDAE3	
126.82			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	126.82	

1) SUBTOTALS This Period This Page (optional).....	394.06
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers	Nature of Debt (Purpose): Copier
Mailing Address 325 Grand Avenue P.O. Box 1755	
City State ZIP Code Des Moines IA 50306	

Outstanding Balance Beginning This Period 318.00	Transaction ID: D3176BA92E7384BCA0A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 318.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers	Nature of Debt (Purpose): Copier
Mailing Address 325 Grand Avenue P.O. Box 1755	
City State ZIP Code Des Moines IA 50306	

Outstanding Balance Beginning This Period 211.99	Transaction ID: D3C51D93654FD40B59BB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 211.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch Brothers	Nature of Debt (Purpose): Copier
Mailing Address 325 Grand Avenue P.O. Box 1755	
City State ZIP Code Des Moines IA 50306	

Outstanding Balance Beginning This Period 318.00	Transaction ID: D49C4F11B6E044AA5A29	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 318.00

1) SUBTOTALS This Period This Page (optional).....	▶	847.99
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period 561.93		Transaction ID: DA1C685B9BFAF4CD7A76	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 561.93	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period 281.01		Transaction ID: DB59E8AD1B4CC46098EF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 281.01	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period 285.25		Transaction ID: D59D402EB48494DF2B2C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 285.25	

1) SUBTOTALS This Period This Page (optional).....	▶	1128.19
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 41 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Monthly Phone Charges						
Mailing Address 8808 Irvine Center Drive							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Irvine</td> <td>CA</td> <td>92618-4201</td> </tr> </table>	City	State	ZIP Code	Irvine	CA	92618-4201	
City	State	ZIP Code					
Irvine	CA	92618-4201					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="153.03"/>	Transaction ID: D40B8D89E3ABE4545B3C						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="153.03"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="153.03"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="153.03"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Monthly Phone Charges						
Mailing Address 8808 Irvine Center Drive							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Irvine</td> <td>CA</td> <td>92618-4201</td> </tr> </table>	City	State	ZIP Code	Irvine	CA	92618-4201	
City	State	ZIP Code					
Irvine	CA	92618-4201					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="660.55"/>	Transaction ID: D0F58D7FEFA5B4E43939						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="660.55"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="660.55"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="660.55"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Monthly Phone Charges						
Mailing Address 8808 Irvine Center Drive							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Irvine</td> <td>CA</td> <td>92618-4201</td> </tr> </table>	City	State	ZIP Code	Irvine	CA	92618-4201	
City	State	ZIP Code					
Irvine	CA	92618-4201					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="625.92"/>	Transaction ID: D7AA61021F4A546ABB58						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="625.92"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="625.92"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="625.92"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1439.50"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 42 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Monthly Phone Charges						
Mailing Address 8808 Irvine Center Drive							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Irvine</td> <td>CA</td> <td>92618-4201</td> </tr> </table>	City	State	ZIP Code	Irvine	CA	92618-4201	
City	State	ZIP Code					
Irvine	CA	92618-4201					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="364.55"/>	Transaction ID: DC3EE07A89ADF414596B						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="364.55"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="364.55"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="364.55"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ABC-Electrical Contractors	Nature of Debt (Purpose): Phone Work						
Mailing Address 10520 Hickman Road Suite ABC							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50325</td> </tr> </table>	City	State	ZIP Code	Des Moines	IA	50325	
City	State	ZIP Code					
Des Moines	IA	50325					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1866.01"/>	Transaction ID: DADFAFC251E1148F6B40						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="1866.01"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1866.01"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1866.01"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Simard Printing	Nature of Debt (Purpose): Printing Services						
Mailing Address 300 Salem Street							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Woburn</td> <td>MA</td> <td>01801-2055</td> </tr> </table>	City	State	ZIP Code	Woburn	MA	01801-2055	
City	State	ZIP Code					
Woburn	MA	01801-2055					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="433.13"/>	Transaction ID: DAEB900B19D5343069F1						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="433.13"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="433.13"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="433.13"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="2663.69"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Old Town Family Restaurant			Nature of Debt (Purpose): Food & Beverage
Mailing Address 2107 Camanche Avenue			
City Clinton	State IA	ZIP Code 52732-6036	

Outstanding Balance Beginning This Period <input type="text" value="130.00"/>		Transaction ID: D8B59DA12044449C0AE9	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="130.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MoreSound Company			Nature of Debt (Purpose): Sound Equipment
Mailing Address 102 North Street			
City Jaffrey	State NH	ZIP Code 03452-5301	

Outstanding Balance Beginning This Period <input type="text" value="400.00"/>		Transaction ID: D4310E2A2AC3D49AFB1C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="400.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Washington Promotions & Printing			Nature of Debt (Purpose): Printing
Mailing Address 5125 MacArthur Blvd. NW Suite 14			
City Washington	State DC	ZIP Code 20016	

Outstanding Balance Beginning This Period <input type="text" value="5547.90"/>		Transaction ID: DE815690D20EF4A6EB02	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5547.90"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="6077.90"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc.			Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road			
City Fairfield	State CT	ZIP Code 06824	

Outstanding Balance Beginning This Period 500.00		Transaction ID: D80E35642DA924E9798A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc.			Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road			
City Fairfield	State CT	ZIP Code 06824	

Outstanding Balance Beginning This Period 500.00		Transaction ID: DF1403972FFAD472384D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TVEyes, Inc.			Nature of Debt (Purpose): Media Services
Mailing Address 2150 Post Road			
City Fairfield	State CT	ZIP Code 06824	

Outstanding Balance Beginning This Period 500.00		Transaction ID: D421D5108046A4FA4973	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1500.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verham News			Nature of Debt (Purpose): Rent
Mailing Address P.O. Box 706			
City White Riv Jct	State VT	ZIP Code 05001-0706	

Outstanding Balance Beginning This Period 910.28		Transaction ID: DE2E3D979014F4B2194A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 910.28	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast			Nature of Debt (Purpose): Cable & Internet
Mailing Address PO Box 1577			
City Newark	State NJ	ZIP Code 07101	

Outstanding Balance Beginning This Period 351.30		Transaction ID: D3A3A16E658A34B44B21	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 351.30	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast			Nature of Debt (Purpose): Cable Service
Mailing Address PO Box 1577			
City Newark	State NJ	ZIP Code 07101	

Outstanding Balance Beginning This Period 513.74		Transaction ID: D054E2AB68F284AAA9A7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 513.74	

1) SUBTOTALS This Period This Page (optional).....	1775.32
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor COVAD	Nature of Debt (Purpose): Internet Services
Mailing Address Dept. 33408 PO BOX 39000	
City State ZIP Code San Francisco CA 94139	

Outstanding Balance Beginning This Period 1056.76	Transaction ID: D7FB209F7C488450BA73	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1056.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COVAD	Nature of Debt (Purpose): Internet Services
Mailing Address Dept. 33408 PO BOX 39000	
City State ZIP Code San Francisco CA 94139	

Outstanding Balance Beginning This Period 1535.76	Transaction ID: D5E78BD6138D849C8A7B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1535.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Interstate Power and Light Co.	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 5007	
City State ZIP Code Dubuque IA 52004-5007	

Outstanding Balance Beginning This Period 250.36	Transaction ID: DF8C3EA191F814F5C94C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.36

1) SUBTOTALS This Period This Page (optional).....	2842.88
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 / 90
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Free Media, Inc.	Nature of Debt (Purpose): Reimbursement for Phone Expenses
Mailing Address 777 West End Avenue #5C	
City New York State NY ZIP Code 10025	

Outstanding Balance Beginning This Period 150.09	Transaction ID: D142C4EE26CC3459DA22	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Free Media, Inc.	Nature of Debt (Purpose): Reimbursement for Travel Expenses
Mailing Address 777 West End Avenue #5C	
City New York State NY ZIP Code 10025	

Outstanding Balance Beginning This Period 635.01	Transaction ID: DF03B1B1603F54C5183C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 635.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Travelers	Nature of Debt (Purpose): Insurance
Mailing Address CL & Specialty Remittance Center Remittance Box 96359	
City Hartford State CT ZIP Code 06183-1008	

Outstanding Balance Beginning This Period 9619.00	Transaction ID: D490B4AF8A85D4E99B96	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9619.00

1) SUBTOTALS This Period This Page (optional).....	10404.10
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Home Front Communications			Nature of Debt (Purpose): Video
Mailing Address 1121 14th Street NW			
City Washington	State DC	ZIP Code 20005-5641	

Outstanding Balance Beginning This Period 6000.00		Transaction ID: D9C275736AC4E46B69DC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Telegraph			Nature of Debt (Purpose): Subscription
Mailing Address PO Box 1008			
City Nashua	State NH	ZIP Code 03061	

Outstanding Balance Beginning This Period 20.81		Transaction ID: D1D76CBB4EBC7498F81D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20.81	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest			Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154			
City Seattle	State WA	ZIP Code 98111	

Outstanding Balance Beginning This Period 1062.75		Transaction ID: D61C348CBB0624AED874	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1062.75	

1) SUBTOTALS This Period This Page (optional).....	▶	7083.56
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 474.82	Transaction ID: DD4C14996C4ED457DBEB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 474.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 575.42	Transaction ID: DA3182C7E844C4F039CE	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 575.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 418.15	Transaction ID: DA397374A80A8418D9FD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 418.15

1) SUBTOTALS This Period This Page (optional).....	1468.39
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 50 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="669.82"/>	Transaction ID: D6224518C358E4E34936
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="669.82"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="657.85"/>	Transaction ID: D160BB52601F3469FBFA
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="657.85"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="58.58"/>	Transaction ID: DC07FD8583E3F4BA58CA
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="58.58"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1386.25"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 677.36	Transaction ID: DF660180FF5C543E886F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 677.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 106.73	Transaction ID: DE2EA2BD913EF4C59A0F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 106.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 471.50	Transaction ID: DE70EBFB35F4E4F5BBA8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 471.50

1) SUBTOTALS This Period This Page (optional).....	▶	1255.59
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 52 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="622.51"/>	Transaction ID: DA75CCBF704CB4716B86
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="622.51"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="431.46"/>	Transaction ID: D703363A20B0E44A7A6C
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="431.46"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066	
City State ZIP Code Cedar Rapids IA 52406	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="401.72"/>	Transaction ID: D5B3618F71E3745EC9DD
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="401.72"/>

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1455.69"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period <input type="text" value="239.60"/>		Transaction ID: DE6029EBE091B415FB6D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="239.60"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period <input type="text" value="852.59"/>		Transaction ID: D21C371285AF1401F9CB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="852.59"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period <input type="text" value="263.55"/>		Transaction ID: DBA39930B48064589AB5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="263.55"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1355.74"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period 50.75		Transaction ID: DF36117C0589D4D9C911	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 50.75	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period 877.55		Transaction ID: D6F4061A34DE04783A3F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 877.55	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period 254.12		Transaction ID: D637921B16CAA45B19B6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 254.12	

1) SUBTOTALS This Period This Page (optional).....	1182.42
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliant Energy			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3066			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period 540.80		Transaction ID: D4DB84BA83BD34248B12	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 540.80	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Allied Telecom			Nature of Debt (Purpose): Internet Services
Mailing Address PO BOx 758792			
City Baltimore	State MD	ZIP Code 21275	

Outstanding Balance Beginning This Period 850.00		Transaction ID: DEA9D9C89FC7F444DAD8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 850.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360			
City Manchester	State NH	ZIP Code 03105-0360	

Outstanding Balance Beginning This Period 246.08		Transaction ID: DE82D6F912C4D47CB9A5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 246.08	

1) SUBTOTALS This Period This Page (optional).....	1636.88
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360			
City Manchester	State NH	ZIP Code 03105-0360	

Outstanding Balance Beginning This Period 376.44		Transaction ID: DD1D454DB157C4318B67	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 376.44	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360			
City Manchester	State NH	ZIP Code 03105-0360	

Outstanding Balance Beginning This Period 993.78		Transaction ID: D5B30D2CCB1A941208DC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 993.78	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Service of New Hampshire			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 360			
City Manchester	State NH	ZIP Code 03105-0360	

Outstanding Balance Beginning This Period 131.82		Transaction ID: D5B0C3B4DA75E4096B6A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 131.82	

1) SUBTOTALS This Period This Page (optional).....	▶	1502.04
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Operations UnLimited, Inc.			Nature of Debt (Purpose): Office Operations
Mailing Address 113 Hilands Place			
City	State	ZIP Code	
Pittsburgh	PA	15237	

Outstanding Balance Beginning This Period		Transaction ID: D7C7D4BF737944E5A9A0	
280.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	280.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Operations UnLimited, Inc.			Nature of Debt (Purpose): Office Operations Consult- ing
Mailing Address 113 Hilands Place			
City	State	ZIP Code	
Pittsburgh	PA	15237	

Outstanding Balance Beginning This Period		Transaction ID: D0126046A41F34134AE6	
2928.11			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2928.11	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pentimento Design LLC			Nature of Debt (Purpose): Reindeer decorations
Mailing Address 1133 Mapleton Avenue			
City	State	ZIP Code	
Suffield	CT	06078	

Outstanding Balance Beginning This Period		Transaction ID: DF4C1AA581F164ADAB6A	
212.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	212.00	

1) SUBTOTALS This Period This Page (optional).....	▶	3420.11
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mason City Public Utilities			Nature of Debt (Purpose): Utilities
Mailing Address 10 First Street Northwest			
City Mason City	State IA	ZIP Code 50401-3224	

Outstanding Balance Beginning This Period		Transaction ID: DDE7D15C566704EE4997	
123.36			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	123.36	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast			Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 3005			
City Southeastern	State PA	ZIP Code 19398-3005	

Outstanding Balance Beginning This Period		Transaction ID: D77C21BCA099B4529A8B	
130.78			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	130.78	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast			Nature of Debt (Purpose): Cable Service
Mailing Address P.O. Box 3005			
City Southeastern	State PA	ZIP Code 19398-3005	

Outstanding Balance Beginning This Period		Transaction ID: D1327435AF7974016BBD	
197.56			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	197.56	

1) SUBTOTALS This Period This Page (optional).....	▶	451.70
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660720			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period 6277.73		Transaction ID: D0A801840ADAA424FBF4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6277.73	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660720			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period 22.28		Transaction ID: DF9E84213BC0C4FA4959	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.28	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VFW Post 775			Nature of Debt (Purpose): Space Rental
Mailing Address 702 West Main Street			
City Ottumwa	State IA	ZIP Code 52501-2226	

Outstanding Balance Beginning This Period 150.00		Transaction ID: D9F4487EF4F6F4DB6923	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00	

1) SUBTOTALS This Period This Page (optional).....	6450.01
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 60 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041	
City State ZIP Code Worcester MA 01615-0023	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">983.75</div>	Transaction ID: DAC79A50A402441AB9DA
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">983.75</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041	
City State ZIP Code Worcester MA 01615-0023	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">896.07</div>	Transaction ID: D03866EA927C6487BAA8
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">896.07</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041	
City State ZIP Code Worcester MA 01615-0023	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">320.68</div>	Transaction ID: DAB48C0D1D9BF48E2819
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">320.68</div>	

1) SUBTOTALS This Period This Page (optional).....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">2200.50</div>
2) TOTALS This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;"> </div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;"> </div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;"> </div>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 694.96		Transaction ID: D7AA2635D35294D99959	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 694.96	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 647.11		Transaction ID: DC05308729895455AAF0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 647.11	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 1646.22		Transaction ID: D684E05F5028F4B9FA8C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1646.22	

1) SUBTOTALS This Period This Page (optional).....	2988.29
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 62 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Des Moines Theatrical Shop
 Nature of Debt (Purpose):
 Costume Rental

Mailing Address 145 5th Street

City State ZIP Code
 West Des Moines IA 50265

Outstanding Balance Beginning This Period	Transaction ID: D7952AAF64B9C4F0997B	
106.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	106.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Des Moines Water Works
 Nature of Debt (Purpose):
 Utilities

Mailing Address 2201 George Flagg Parkway

City State ZIP Code
 Des Moines IA 50321-1190

Outstanding Balance Beginning This Period	Transaction ID: D1475748209CF4A0092F	
117.91		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	117.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 REMAX Results Realty
 Nature of Debt (Purpose):
 Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code
 Mason City IA 50401

Outstanding Balance Beginning This Period	Transaction ID: D14F42980C9EF465D8A0	
1036.46		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1036.46

1) SUBTOTALS This Period This Page (optional).....	1260.37
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jocelyn Augustino Photogrpaher			Nature of Debt (Purpose): Photographer
Mailing Address 3416 Gunston Road			
City Alexandria	State VA	ZIP Code 22302-2134	

Outstanding Balance Beginning This Period		Transaction ID: D0781506CE4AC48A0805	
69.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	69.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Deaf Services Unlimited			Nature of Debt (Purpose): Interpreting Service
Mailing Address Suite 170			
City Des Moines	State IA	ZIP Code 50309	

Outstanding Balance Beginning This Period		Transaction ID: DF8A44964B3424CC3B77	
130.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	130.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Extra Space Storage			Nature of Debt (Purpose): Storage
Mailing Address 132 Silas Deane Highway			
City Wethersfield	State CT	ZIP Code 06109	

Outstanding Balance Beginning This Period		Transaction ID: DAA10574E87F546189CE	
89.04			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	89.04	

1) SUBTOTALS This Period This Page (optional).....	▶	288.04
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Drink More Water	Nature of Debt (Purpose): Water Delivery
Mailing Address Montgomery County Airpark 7595-A Rickenbacker Drive	
City Gaithersburg State MD ZIP Code 20879	

Outstanding Balance Beginning This Period 32.50	Transaction ID: DCDE895EA2CFC4A338ED	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NexGen	Nature of Debt (Purpose): Utilities
Mailing Address 10500 Hickman Road Ste J	
City Clive State IA ZIP Code 50325-3706	

Outstanding Balance Beginning This Period 224.86	Transaction ID: D2FBA9339003447ADB22	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 224.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mediacom	Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 5744	
City Carol Stream State IL ZIP Code 60197-5744	

Outstanding Balance Beginning This Period 19.14	Transaction ID: DBAEE80A9C8F14CBF964	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.14

1) SUBTOTALS This Period This Page (optional).....	▶	276.50
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mediacom			Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 5744			
City Carol Stream	State IL	ZIP Code 60197-5744	

Outstanding Balance Beginning This Period		Transaction ID: D34D4235A01F441BAA58	
92.37			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	92.37	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WHO Newsradio 1040			Nature of Debt (Purpose): Recording Services
Mailing Address 2141 Grand Avenue			
City Des Moines	State IA	ZIP Code 50312	

Outstanding Balance Beginning This Period		Transaction ID: D5CA66406DA5143F7848	
400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	400.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Big Ten Rentals, Inc.			Nature of Debt (Purpose): Bases
Mailing Address 1820 Boyrum St			
City Iowa City	State IA	ZIP Code 52240-4555	

Outstanding Balance Beginning This Period		Transaction ID: D9CE80039AE0F470B870	
34.82			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	34.82	

1) SUBTOTALS This Period This Page (optional).....	▶	527.19
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DC Treasurer	Nature of Debt (Purpose): Parking Fine
Mailing Address Adjudication Services PO Box 2014	
City State ZIP Code Washington DC 20013	

Outstanding Balance Beginning This Period 5.00	Transaction ID: DF17F5AFCCC744C43A1E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Storefront Political Media	Nature of Debt (Purpose): Photographer
Mailing Address 250 Sutter Street, Suite 650	
City State ZIP Code San Francisco CA 94108	

Outstanding Balance Beginning This Period 537.08	Transaction ID: DDB39DC1EDB03445B8B5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 537.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bi-State Cartridge Service, Inc.	Nature of Debt (Purpose): Office Supplies
Mailing Address 1325 15th Street	
City State ZIP Code Moline IL 61265	

Outstanding Balance Beginning This Period 130.54	Transaction ID: D163D453900874450889	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.54

1) SUBTOTALS This Period This Page (optional).....	▶	672.62
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV			Nature of Debt (Purpose): Cable Service
Mailing Address PO Box 60036			
City Los Angeles	State CA	ZIP Code 90060	

Outstanding Balance Beginning This Period 166.33		Transaction ID: D8A78FBAECFAE431F9D3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 166.33	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV			Nature of Debt (Purpose): Cable Service
Mailing Address PO Box 60036			
City Los Angeles	State CA	ZIP Code 90060	

Outstanding Balance Beginning This Period 75.40		Transaction ID: D01F431A133824BDFB8A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 75.40	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV			Nature of Debt (Purpose): Cable Service
Mailing Address PO Box 60036			
City Los Angeles	State CA	ZIP Code 90060	

Outstanding Balance Beginning This Period 32.22		Transaction ID: D98583EF190B742F4B0A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32.22	

1) SUBTOTALS This Period This Page (optional).....	▶	273.95
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 68 / 90
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct TV	Nature of Debt (Purpose): Cable Service
Mailing Address PO Box 60036	
City State ZIP Code Los Angeles CA 90060	

Outstanding Balance Beginning This Period 44.26	Transaction ID: DBC6FF85AE35C41E68CA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 44.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Air Charter Team, Inc.	Nature of Debt (Purpose): Transportation
Mailing Address 10015 N.W. Ambassador Drive Suite 202	
City State ZIP Code Kansas City MO 64153	

Outstanding Balance Beginning This Period 1304.61	Transaction ID: DCAA2DBC5CEA94CD089C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1304.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zahara's Cafe & Bakery, Inc.	Nature of Debt (Purpose): Food & Beverage
Mailing Address 525 Washington Blvd, 2nd Flr	
City State ZIP Code Jersey City NJ 07310	

Outstanding Balance Beginning This Period 2500.00	Transaction ID: DD281F4AE8DC34BC7B93	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

1) SUBTOTALS This Period This Page (optional).....	▶	3848.87
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period 2919.27		Transaction ID: D9A45BD2CD468457093F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2919.27	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period 755.64		Transaction ID: D0F2F1D778B8B4FC99B6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 755.64	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period 118.88		Transaction ID: DBDF3A2CB333C4D6484D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 118.88	

1) SUBTOTALS This Period This Page (optional).....	3793.79
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period <input type="text" value="38.96"/>		Transaction ID: D7B85A230D64E4671B06	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="38.96"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period <input type="text" value="239.04"/>		Transaction ID: DD0258CA80C884AB6960	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="239.04"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period <input type="text" value="164.80"/>		Transaction ID: DB9074E8EDA3B4C25ABE	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="164.80"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="442.80"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 71 / 90
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan	Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue	
City Waltham State MA ZIP Code 02451	

Outstanding Balance Beginning This Period 1481.16	Transaction ID: D DFA00C779CF445C8AA6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1481.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan	Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue	
City Waltham State MA ZIP Code 02451	

Outstanding Balance Beginning This Period 298.81	Transaction ID: D 74946712598A4C599FE	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 298.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Dubuque Leader	Nature of Debt (Purpose): Printing
Mailing Address 1527 Central Avenue	
City Dubuque State IA ZIP Code 52004	

Outstanding Balance Beginning This Period 360.50	Transaction ID: D 308E0032B374413E8A3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 360.50

1) SUBTOTALS This Period This Page (optional).....	▶	2140.47
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Printer Works			Nature of Debt (Purpose): Printer
Mailing Address 3481 Arden Road			
City Hayward	State CA	ZIP Code 94545	

Outstanding Balance Beginning This Period 819.44		Transaction ID: DFC2998A4374B4E86BCA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 819.44	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period 1406.57		Transaction ID: DB92957A464EF4AC685D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1406.57	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period 1115.75		Transaction ID: DEC21CC9229D5404F97B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1115.75	

1) SUBTOTALS This Period This Page (optional).....	3341.76
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period <input type="text" value="123.36"/>		Transaction ID: DF30D747F375F47E5882	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="123.36"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period <input type="text" value="811.87"/>		Transaction ID: DF6D9496BDF604118AD8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="811.87"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period <input type="text" value="78.77"/>		Transaction ID: D2F929A7374FC4A50B84	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="78.77"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1014.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period		Transaction ID: D91E4CB1724CB455C94A	
416.01			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	416.01	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period		Transaction ID: D7B3E6DAFE5CE4AFB9B8	
65.24			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	65.24	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy			Nature of Debt (Purpose): Utilities
Mailing Address P.O. Box 8020			
City Davenport	State IA	ZIP Code 52808-8020	

Outstanding Balance Beginning This Period		Transaction ID: DAB442CA849544E83A13	
196.90			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	196.90	

1) SUBTOTALS This Period This Page (optional).....	▶	678.15
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 75 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy	Nature of Debt (Purpose): Utilities						
Mailing Address P.O. Box 8020							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Davenport</td> <td>IA</td> <td>52808-8020</td> </tr> </table>	City	State	ZIP Code	Davenport	IA	52808-8020	
City	State	ZIP Code					
Davenport	IA	52808-8020					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="72.04"/>	Transaction ID: D275E706E6F7F4C6C938						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="72.04"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="72.04"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="72.04"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MidAmerican Energy	Nature of Debt (Purpose): Utilities						
Mailing Address P.O. Box 8020							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Davenport</td> <td>IA</td> <td>52808-8020</td> </tr> </table>	City	State	ZIP Code	Davenport	IA	52808-8020	
City	State	ZIP Code					
Davenport	IA	52808-8020					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="659.58"/>	Transaction ID: DFC448EB6B1054323A65						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="659.58"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="659.58"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="659.58"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Peter Nichols	Nature of Debt (Purpose): Consulting Fee						
Mailing Address 222 Stony Brook Road							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Hopewell</td> <td>NJ</td> <td>08525-3003</td> </tr> </table>	City	State	ZIP Code	Hopewell	NJ	08525-3003	
City	State	ZIP Code					
Hopewell	NJ	08525-3003					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="15000.00"/>	Transaction ID: DE18E31E6A6564CF4B75						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="15000.00"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="15000.00"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="15000.00"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="15731.62"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 76 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jim VanDusseldorp	Nature of Debt (Purpose): Bus Servicing						
Mailing Address 2406 15th Ave. N.							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Clear Lake</td> <td>IA</td> <td>50428-2037</td> </tr> </table>	City	State	ZIP Code	Clear Lake	IA	50428-2037	
City	State	ZIP Code					
Clear Lake	IA	50428-2037					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="92.50"/>	Transaction ID: DECE5259C4BB240ADBB7						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="92.50"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="92.50"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="92.50"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC	Nature of Debt (Purpose): Fees						
Mailing Address 1101 Penn Avenue							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Scranton</td> <td>PA</td> <td>18509</td> </tr> </table>	City	State	ZIP Code	Scranton	PA	18509	
City	State	ZIP Code					
Scranton	PA	18509					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="136.05"/>	Transaction ID: DF477C3FE35E04A05B7F						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="136.05"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="136.05"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="136.05"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Until	Nature of Debt (Purpose): Utilities						
Mailing Address PO BOX 2013							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Concord</td> <td>NH</td> <td>03302</td> </tr> </table>	City	State	ZIP Code	Concord	NH	03302	
City	State	ZIP Code					
Concord	NH	03302					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="115.06"/>	Transaction ID: D14B3EB6706674783815						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="115.06"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="115.06"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="115.06"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="343.61"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northern Business Machines			Nature of Debt (Purpose): Rental
Mailing Address 24 Terry Avenue			
City Burlington	State MA	ZIP Code 01803	

Outstanding Balance Beginning This Period 698.00		Transaction ID: DF72BE3ADBBB14CB9BC7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 698.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Grand Colony			Nature of Debt (Purpose): Lodging
Mailing Address 2824 Grand Avenue, #218			
City Des Moines	State IA	ZIP Code 50312	

Outstanding Balance Beginning This Period 153.50		Transaction ID: D232577C9B94046BB9A9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 153.50	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank			Nature of Debt (Purpose): Loan interest payment
Mailing Address 185 Asylum Street			
City Hartford	State CT	ZIP Code 06103-3401	

Outstanding Balance Beginning This Period 4177.74		Transaction ID: D2455C9526EE244CC9BA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4177.74	

1) SUBTOTALS This Period This Page (optional).....	▶	5029.24
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 8110			
City Aurora	State IL	ZIP Code 60572	

Outstanding Balance Beginning This Period		Transaction ID: D51DCEF2884624EE6A6A	
111.80			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	111.80	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PMI			Nature of Debt (Purpose): Parking
Mailing Address			
City Washington	State DC	ZIP Code	

Outstanding Balance Beginning This Period		Transaction ID: D8747457AA9894F1CB0C	
465.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	465.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS			Nature of Debt (Purpose): Shipping
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	ZIP Code 19170	

Outstanding Balance Beginning This Period		Transaction ID: DBA9563936FE04325AD0	
59.43			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	59.43	

1) SUBTOTALS This Period This Page (optional).....	▶	636.23
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing	Nature of Debt (Purpose): Finance Charge
Mailing Address 1739 East Grand Avenue	
City State ZIP Code Des Moines IA 50316	

Outstanding Balance Beginning This Period 110.59	Transaction ID: D7499897E1ABB4EE2962	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 110.59

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northland Trumbull, LLC	Nature of Debt (Purpose): Rent
Mailing Address C/o Northland Investment Corporati P.O. Box 845604	
City State ZIP Code Boston MA 02284	

Outstanding Balance Beginning This Period 3850.00	Transaction ID: D27B30042D3C24348857	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3850.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Heartland Flagpoles and Flags	Nature of Debt (Purpose): Flags
Mailing Address 3719 SW 9th Street	
City State ZIP Code Des Moines IA 50315	

Outstanding Balance Beginning This Period 215.00	Transaction ID: D92D91DF93AE6487B8F3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 215.00

1) SUBTOTALS This Period This Page (optional).....	4175.59
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank	Nature of Debt (Purpose): Loan Interest payment
Mailing Address 185 Asylum Street	
City State ZIP Code Hartford CT 06103-3401	

Outstanding Balance Beginning This Period 7056.90	Transaction ID: DA8EF061F679D4CBB9F4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7056.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes	Nature of Debt (Purpose): Postage
Mailing Address PO Box 856390	
City State ZIP Code Louisville KY 40285	

Outstanding Balance Beginning This Period 5522.57	Transaction ID: D87D4786A18704E3E866	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5522.57

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor IAFF FIREPAC	Nature of Debt (Purpose): Transportation Costs
Mailing Address Attn: David B. Billy 1750 New York Ave, NW	
City State ZIP Code Washington DC 20006-5305	

Outstanding Balance Beginning This Period 32233.24	Transaction ID: DE8437A16695047AC84E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32233.24

1) SUBTOTALS This Period This Page (optional).....	44812.71
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Kirkwood			Nature of Debt (Purpose): Rent
Mailing Address 400 Walnut Street			
City Des Moines	State IA	ZIP Code 50309	

Outstanding Balance Beginning This Period 757.17		Transaction ID: DF06ED48AFB25453C90A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 757.17	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon Corporate Real Estate			Nature of Debt (Purpose): Rent
Mailing Address Mail Code FLG1-300 8800 Adamo Drive			
City Tampa	State FL	ZIP Code 33619	

Outstanding Balance Beginning This Period 23250.00		Transaction ID: D3856747E818749188BE	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23250.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS			Nature of Debt (Purpose): Courier Service
Mailing Address PO Box 7247-0244			
City Philadelphia	State PA	ZIP Code 19170	

Outstanding Balance Beginning This Period 86.50		Transaction ID: D42C8F3A7325E4A5A80E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 86.50	

1) SUBTOTALS This Period This Page (optional).....	▶	24093.67
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedar Rapids Municipal Utilities			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 3255			
City Cedar Rapids	State IA	ZIP Code 52406	

Outstanding Balance Beginning This Period <input type="text" value="57.90"/>		Transaction ID: D0E366AACBEEB484CB02	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="57.90"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trumba Corporation			Nature of Debt (Purpose): Subscription
Mailing Address 1200 5th Ave. Suite 1700			
City Seattle	State WA	ZIP Code 98101	

Outstanding Balance Beginning This Period <input type="text" value="1199.40"/>		Transaction ID: DF4C21A8864FF4D46B53	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1199.40"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor			
City Seattle	State WA	ZIP Code 98101-3099	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>		Transaction ID: D76E8E67033CC4385B66	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	▶	<input type="text" value="11257.30"/>
2) TOTALS This Period (last page this line number only).....	▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS	Nature of Debt (Purpose): Courier
Mailing Address PO Box 7247-0244	
City Philadelphia State PA ZIP Code 19170	

Outstanding Balance Beginning This Period 59.95	Transaction ID: DD71C9A3EFA0F4512B37	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 59.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northland Trumbull, LLC	Nature of Debt (Purpose): Rent
Mailing Address C/o Northland Investment Corporati P.O. Box 845604	
City Boston State MA ZIP Code 02284	

Outstanding Balance Beginning This Period 3850.00	Transaction ID: D62DA2D977A734EC594A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3850.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank	Nature of Debt (Purpose): Interest payment
Mailing Address 185 Asylum Street	
City Hartford State CT ZIP Code 06103-3401	

Outstanding Balance Beginning This Period 5700.90	Transaction ID: DDD808CCF6F3F461FA47	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5700.90

1) SUBTOTALS This Period This Page (optional).....	▶	9610.85
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 8110			
City Aurora	State IL	ZIP Code 60572	

Outstanding Balance Beginning This Period 623.00		Transaction ID: D4FFB54806211448B923	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 623.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor			
City Seattle	State WA	ZIP Code 98101-3099	

Outstanding Balance Beginning This Period 10009.00		Transaction ID: D981988A8CAD9462E954	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10009.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northland Trumbull, LLC			Nature of Debt (Purpose): Rent
Mailing Address C/o Northland Investment Corporati P.O. Box 845604			
City Boston	State MA	ZIP Code 02284	

Outstanding Balance Beginning This Period 3850.00		Transaction ID: DA4696BC628A349F7971	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3850.00	

1) SUBTOTALS This Period This Page (optional).....	▶	14482.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedric Williams			Nature of Debt (Purpose): Car Repair
Mailing Address 4401 Aldrich Avenue S			
City Minneapolis	State MN	ZIP Code 55419-4821	

Outstanding Balance Beginning This Period 280.43		Transaction ID: D65530D3150B143C5BDD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 280.43	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedric Williams			Nature of Debt (Purpose): Car Rental
Mailing Address 4401 Aldrich Avenue S			
City Minneapolis	State MN	ZIP Code 55419-4821	

Outstanding Balance Beginning This Period 748.02		Transaction ID: DAC0405B098BA40BDB8F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 748.02	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cedric Williams			Nature of Debt (Purpose): Car repair
Mailing Address 4401 Aldrich Avenue S			
City Minneapolis	State MN	ZIP Code 55419-4821	

Outstanding Balance Beginning This Period 3197.74		Transaction ID: D80F5A221749E4D8CAFD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3197.74	

1) SUBTOTALS This Period This Page (optional).....	▶	4226.19
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Webster Bank			Nature of Debt (Purpose): Interest Payment
Mailing Address 185 Asylum Street			
City Hartford	State CT	ZIP Code 06103-3401	

Outstanding Balance Beginning This Period 1625.86		Transaction ID: D6D0173F2D16C488496D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1625.86	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voxel.net inc			Nature of Debt (Purpose): Web Hosting
Mailing Address 29 Broadway, 30th Floor			
City New York	State NY	ZIP Code 10006-3216	

Outstanding Balance Beginning This Period 2459.50		Transaction ID: DC06AE5CA3EED49569AE	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2459.50	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor			
City Seattle	State WA	ZIP Code 98101-3099	

Outstanding Balance Beginning This Period 175.00		Transaction ID: D4F4CB881B6764E95B4B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 175.00	

1) SUBTOTALS This Period This Page (optional).....	▶	4260.36
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 10009.00	Transaction ID: DF0B7FFEB54884D8496F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10009.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing	Nature of Debt (Purpose): Finance Charge
Mailing Address 1739 East Grand Avenue	
City State ZIP Code Des Moines IA 50316	

Outstanding Balance Beginning This Period 111.89	Transaction ID: DD996084ABB46436095F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 111.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Cleaver Company	Nature of Debt (Purpose): Food & Beverage
Mailing Address 75 Ninth Avenue	
City State ZIP Code New York NY 10011	

Outstanding Balance Beginning This Period 378.20	Transaction ID: D30F04EAEC434423A83D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 378.20

1) SUBTOTALS This Period This Page (optional).....	10499.09
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 88 / 90
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Secured Shred	Nature of Debt (Purpose): Shredding
Mailing Address 624 Wilmont Ridge Road	
City State ZIP Code Westminster MD 21157-7318	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="120.00"/>	Transaction ID: D5880C9A067654615B51
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="120.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wired for Change, Inc.	Nature of Debt (Purpose): Internet Services
Mailing Address 1700 Connecticut Ave., NW Suite 403	
City State ZIP Code Washington DC 20009	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="4000.00"/>	Transaction ID: DA09D2641F3154B62833
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="4000.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voxel.net inc	Nature of Debt (Purpose): Web Hosting
Mailing Address 29 Broadway, 30th Floor	
City State ZIP Code New York NY 10006-3216	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="4919.00"/>	Transaction ID: DF06FD864428E4C118ED
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="4919.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="9039.00"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hertz	Nature of Debt (Purpose):
Mailing Address 333 W. Harbor Drive	
City San Diego State CA ZIP Code 92101	

Outstanding Balance Beginning This Period 4111.17	Transaction ID: DA142EB9576294B0793E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4111.17

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor USRental.com	Nature of Debt (Purpose): Payment for computers
Mailing Address 970 Summer Street	
City Stamford State CT ZIP Code 06905-5542	

Outstanding Balance Beginning This Period 4658.70	Transaction ID: D1F57A4B00A37493E946	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4658.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Metropolitan Club	Nature of Debt (Purpose): Food & Beverage
Mailing Address One East 60th Street	
City New York State NY ZIP Code 10022	

Outstanding Balance Beginning This Period 21459.11	Transaction ID: D633B2D0BC9E641C0B52	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21459.11

1) SUBTOTALS This Period This Page (optional).....	▶	30228.98
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Des Moines Embassy Club	Nature of Debt (Purpose): Food & Beverage
Mailing Address 801 Grand Avenue Suite 4000	
City State ZIP Code Des Moines IA 50309-2762	

Outstanding Balance Beginning This Period 4451.20	Transaction ID: DDA7C5EA9B930420A98A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4451.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carter Printing	Nature of Debt (Purpose): Printing
Mailing Address 1739 East Grand Avenue	
City State ZIP Code Des Moines IA 50316	

Outstanding Balance Beginning This Period 7562.83	Transaction ID: D73B6D84253894C72B62	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7562.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 10017.02	Transaction ID: D137E7211B1E44139A9C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10017.02

1) SUBTOTALS This Period This Page (optional).....	▶	22031.05
2) TOTALS This Period (last page this line number only).....	▶	576521.43
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	431764.39