

REPORT OF RECEIPTS AND DISBURSEMENTS
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 42

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.)

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input checked="" type="checkbox"/> January 31 Year End Report	Monthly Report Due On: <table style="width:100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table> <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____ <input type="checkbox"/> Thirtieth day report following the General Election on _____ on _____	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31
<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20											
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20											
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20											
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31											

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 10/01/2009	THROUGH 12/31/2009
---------------------------	---------------------------	------------------------------

SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	.....	137741.64
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	.....	4600.00
8. SUBTOTAL (Lines 6 and 7)	.....	142341.64
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	46346.45
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	95995.19
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)	.....	335361.78
13. EXPENDITURES SUBJECT TO LIMITATION	.....	15532315.03
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)	.....	9456353.20
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	.....	15537855.03

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 01/29/2010
--	--------------------

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

(PAGE 2, FEC FORM 3P)

Name of committee (in full) Chris Dodd For President Inc		Report Covering the Period From: 10/01/2009 To: 12/31/2009	
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	4600.00	10089355.20	
(b) Political Party Committees	0.00	100.00	
(c) Other Political Committees	0.00	750698.30	
(d) The Candidate	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	4600.00	10840153.50	
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	0.00	87687.02	
(b) Fundraising	0.00	5540.00	
(c) Legal and Accounting	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	93227.02	
21. OTHER RECEIPTS (Dividend, Interest, etc.)	0.00	55536.06	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	4600.00	18992474.54	
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	46346.45	15625542.05	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	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	1302811.25	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	1302811.25	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	0.00	1206542.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	177258.30	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	1383800.30	
29. OTHER DISBURSEMENTS	0.00	11000.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	46346.45	18763263.60	
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 3 / 42
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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	695420.15
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	2631492.25	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	3358967.62

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4 / 42
	(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) Christine Kranz Smith		Date of Receipt
	Mailing Address 3339 Stephenson Place NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 4 / 2 0 0 9
	City	State	Zip Code
	Washington	DC	20015-2451
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2300.00
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: A137998D88D8B48A098E
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) James P Smith		Date of Receipt
	Mailing Address 3339 Stephenson Place NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 4 / 2 0 0 9
	City	State	Zip Code
	Washington	DC	20015-2451
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2300.00
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: AD2F63B32D5EF405B9F7
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	4600.00
TOTAL This Period (last page this line number only)	4600.00

**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

A. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll processing 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: B55308999642F40E1947 Date of Disbursement 10 / 01 / 2009
	Amount of Each Disbursement this Period 72.79
B. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing 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: BEC3F62EC7A6C44D1850 Date of Disbursement 10 / 15 / 2009
	Amount of Each Disbursement this Period 80.38
C. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing 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: B96544E76108844278B9 Date of Disbursement 11 / 01 / 2009
	Amount of Each Disbursement this Period 72.96

SUBTOTAL of Disbursements This Page (optional) ▶	226.13
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)

<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) Advantage Payroll Services Mailing Address 126 Marrow Road City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing Fee 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: B30118BE5C82A4DD8B81 Date of Disbursement 11 / 15 / 2009
	Amount of Each Disbursement this Period 72.96 Category/Type

B. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing Fee 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: B0ABE7ADC9C02440D8D2 Date of Disbursement 12 / 01 / 2009
	Amount of Each Disbursement this Period 72.96 Category/Type

C. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing 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: BB429EDD01560422FAFB Date of Disbursement 12 / 15 / 2009
	Amount of Each Disbursement this Period 72.96 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	218.88
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)

<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) Allied Telecom <hr/> Mailing Address PO BOx 758792 <hr/> City Baltimore State MD Zip Code 21275 <hr/> Purpose of Disbursement Internet Service 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: B412E9B373CF844D3B4E Date of Disbursement 11 / 18 / 2009 <hr/> Amount of Each Disbursement this Period 4250.00
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: BF7089CBB162A4AEA904 Date of Disbursement 10 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 40.31
C.	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: B38B43373333F45728D4 Date of Disbursement 10 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 40.31

SUBTOTAL of Disbursements This Page (optional) ▶

4330.62

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)

<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	Transaction ID: BE03079FA9D7040B98C1
	Mailing Address 25 Sigourney St.	Date of Disbursement 11 / 01 / 2009
	City Hartford State CT Zip Code 06106	Amount of Each Disbursement this Period 43.13
	Purpose of Disbursement Taxes Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) CT Dept Taxation	Transaction ID: B8B4BC5E2CDF14BAAA2A
	Mailing Address 25 Sigourney St.	Date of Disbursement 11 / 15 / 2009
	City Hartford State CT Zip Code 06106	Amount of Each Disbursement this Period 43.13
	Purpose of Disbursement Taxes Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) CT Dept Taxation	Transaction ID: BAD31C5EA84B544D195C
	Mailing Address 25 Sigourney St.	Date of Disbursement 12 / 01 / 2009
	City Hartford State CT Zip Code 06106	Amount of Each Disbursement this Period 43.13
	Purpose of Disbursement Taxes Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	129.39
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)

<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 Mailing Address 25 Sigourney St. City Hartford State CT Zip Code 06106 Purpose of Disbursement Taxes 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: B9A2797342AAD403C82D Date of Disbursement 12 / 15 / 2009 Amount of Each Disbursement this Period 43.13
B.	Full Name (Last, First, Middle Initial) IAFF FIREPAC Mailing Address Attn: David B. Billy 1750 New York Ave, NW City Washington State DC Zip Code 20006-5305 Purpose of Disbursement 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: BC4DFD96B940649758C4 Date of Disbursement 10 / 21 / 2009 Amount of Each Disbursement this Period 32233.24
C.	Full Name (Last, First, Middle Initial) IRS Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes 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: BCF8E1EB7A95B4A52963 Date of Disbursement 10 / 01 / 2009 Amount of Each Disbursement this Period 365.05

SUBTOTAL of Disbursements This Page (optional) ▶

32641.42

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 10 / 42

<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: B203B38F16E4F4160B79 Date of Disbursement 10 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 365.03
B.	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: B1D429C5BD34E44D3B52 Date of Disbursement 11 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 365.05
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: B5712A70651C14142B6C Date of Disbursement 11 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 365.05

SUBTOTAL of Disbursements This Page (optional) ▶

1095.13

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 11 / 42

<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 Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 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: BD93E00380C8E41C5809 Date of Disbursement 12 / 01 / 2009 Amount of Each Disbursement this Period 365.05 Category/Type
B.	Full Name (Last, First, Middle Initial) IRS Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes 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: BD9E16082152B47BFA5E Date of Disbursement 12 / 15 / 2009 Amount of Each Disbursement this Period 365.03 Category/Type
C.	Full Name (Last, First, Middle Initial) Kathryn Damato Mailing Address 10 Blackhawk Lane City West Hartford State CT Zip Code 06117-2903 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: B6EBFB038AF0343B8BBA Date of Disbursement 10 / 01 / 2009 Amount of Each Disbursement this Period 1074.83 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

1804.91

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 13 / 42

<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) Kathryn Damato</p> <p>Mailing Address 10 Blackhawk Lane</p> <p>City West Hartford State CT Zip Code 06117-2903</p> <p>Purpose of Disbursement Salary</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>Transaction ID: B179A146869644FD3AC3</p> <p>Date of Disbursement</p> <p>12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p>1072.01</p> <p>Category/Type</p> <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kathryn Damato</p> <p>Mailing Address 10 Blackhawk Lane</p> <p>City West Hartford State CT Zip Code 06117-2903</p> <p>Purpose of Disbursement Salary</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>Transaction ID: B049C1A0C80C54BA6B9A</p> <p>Date of Disbursement</p> <p>12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p>1072.02</p> <p>Category/Type</p> <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dennis Hearne</p> <p>Mailing Address 779 Vallejo Street</p> <p>City San Francisco State CA Zip Code 94133-3834</p> <p>Purpose of Disbursement Photo Images</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>Transaction ID: B0CD84C1205B145A2B5A</p> <p>Date of Disbursement</p> <p>12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p>537.08</p> <p>Category/Type</p> <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2681.11

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

46346.45

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 / 42
 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 Immediacy Group	Nature of Debt (Purpose): Television						
Mailing Address 1800 S 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>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>	City	State	ZIP Code	Washington	DC	20009	
City	State	ZIP Code					
Washington	DC	20009					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="45000.00"/>	Transaction ID: D4C86C8799F3445D78A5						
<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="45000.00"/></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="45000.00"/>	
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="45000.00"/>					

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="65000.00"/>	Transaction ID: D6EC88DE849224213A22						
<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="65000.00"/></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="65000.00"/>	
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="65000.00"/>					

C. 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							
<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>West Des Moines</td> <td>IA</td> <td>50265</td> </tr> </table>	City	State	ZIP Code	West Des Moines	IA	50265	
City	State	ZIP Code					
West Des Moines	IA	50265					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="106.00"/>	Transaction ID: D7952AAF64B9C4F0997B						
<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="106.00"/></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="106.00"/>	
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="106.00"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="110106.00"/>
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 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		Transaction ID: DE079EBE7C9854073A8E	
50000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	50000.00	

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

C. 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	State	ZIP Code	
New York	NY	10024-6025	

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

1) SUBTOTALS This Period This Page (optional).....	▶	52141.07
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 Embarq			Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660068			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period <input type="text" value="1064.16"/>		Transaction ID: DBF0B293CD60A40ED8E0	
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="1064.16"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq			Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660068			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period <input type="text" value="378.82"/>		Transaction ID: DF4A4422265684FB29B9	
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="378.82"/>	

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 <input type="text" value="153.03"/>		Transaction ID: D40B8D89E3ABE4545B3C	
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="153.03"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1596.01"/>
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 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 364.55		Transaction ID: DC3EE07A89ADF414596B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 364.55	

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 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	

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 660.55		Transaction ID: D0F58D7FEFA5B4E43939	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 660.55	

1) SUBTOTALS This Period This Page (optional).....	▶	1587.03
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 Free Media, Inc.	Nature of Debt (Purpose): Reimbursement for Phone Expenses
Mailing Address 777 West End Avenue #5C	
City State ZIP Code New York NY 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 The Telegraph	Nature of Debt (Purpose): Subscription
Mailing Address PO Box 1008	
City State ZIP Code Nashua NH 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 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).....	421.26
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 19 / 42	
	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 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 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

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 State ZIP Code Jaffrey NH 03452-5301	

Outstanding Balance Beginning This Period 400.00	Transaction ID: D4310E2A2AC3D49AFB1C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

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 State ZIP Code Southeastern PA 19398-3005	

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

1) SUBTOTALS This Period This Page (optional).....	▶	7830.87
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) PAGE 20 / 42
 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 Comcast	Nature of Debt (Purpose): Cable						
Mailing Address P.O. Box 3005							
<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>Southeastern</td> <td>PA</td> <td>19398-3005</td> </tr> </table>	City	State	ZIP Code	Southeastern	PA	19398-3005	
City	State	ZIP Code					
Southeastern	PA	19398-3005					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="130.78"/>	Transaction ID: D77C21BCA099B4529A8B						
<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="130.78"/></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="130.78"/>	
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="130.78"/>					

B. 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							
<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>Manchester</td> <td>CT</td> <td>06042-7959</td> </tr> </table>	City	State	ZIP Code	Manchester	CT	06042-7959	
City	State	ZIP Code					
Manchester	CT	06042-7959					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="107.00"/>	Transaction ID: D3BEB98490D8F4B87A07						
<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="107.00"/></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="107.00"/>	
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="107.00"/>					

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="457.78"/>
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 Comcast			Nature of Debt (Purpose): Cable & Internet
Mailing Address PO Box 1577			
City Newark	State NJ	ZIP Code 07101	

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

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

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		Transaction ID: D8A78FBAECFAE431F9D3	
83.52			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	83.52	

1) SUBTOTALS This Period This Page (optional).....	▶	948.56
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 Keyspan			Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue			
City Waltham	State MA	ZIP Code 02451	

Outstanding Balance Beginning This Period 239.04		Transaction ID: DD0258CA80C884AB6960	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 239.04	

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 1481.16		Transaction ID: DDFA00C779CF445C8AA6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1481.16	

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

1) SUBTOTALS This Period This Page (optional).....	▶	2120.20
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 23 / 42
	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 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 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

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 983.75	Transaction ID: DAC79A50A402441AB9DA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 983.75

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 State ZIP Code Ottumwa IA 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).....	2011.30
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 Zahara's Cafe & Bakery, Inc.			Nature of Debt (Purpose): Food & Beverage
Mailing Address 525 Washington Blvd, 2nd Flr			
City Jersey City	State NJ	ZIP Code 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	

B. 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 Mason City	State IA	ZIP Code 50401	

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

C. 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 138.02		Transaction ID: DEAE4CB41D358C496EAEB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 138.02	

1) SUBTOTALS This Period This Page (optional).....	▶	3674.48
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 78.77		Transaction ID: D2F929A7374FC4A50B84	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 78.77	

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 811.87		Transaction ID: DF6D9496BDF604118AD8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 811.87	

C. 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	

1) SUBTOTALS This Period This Page (optional).....	▶	1800.92
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 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 <input type="text" value="34.82"/>		Transaction ID: D9CE80039AE0F470B870	
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="34.82"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="266.02"/>		Transaction ID: D13EE948ED74B4BE0B66	
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="266.02"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="149.94"/>		Transaction ID: D26D95FA926E146209F5	
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="149.94"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="450.78"/>
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 Storefront Political Media			Nature of Debt (Purpose): Photographer
Mailing Address 250 Sutter Street, Suite 650			
City San Francisco	State CA	ZIP Code 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	

B. 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	

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

1) SUBTOTALS This Period This Page (optional).....	▶	648.59
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 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	

B. 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	

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

1) SUBTOTALS This Period This Page (optional).....	▶	558.14
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 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

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 669.82	Transaction ID: D6224518C358E4E34936	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 669.82

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 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

1) SUBTOTALS This Period This Page (optional).....	2207.39
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)

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 type="text" value="657.85"/>	Transaction ID: D160BB52601F3469FBFA	
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="657.85"/>

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 type="text" value="471.50"/>	Transaction ID: DE70EBFB35F4E4F5BBA8	
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="471.50"/>

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 type="text" value="58.58"/>	Transaction ID: DC07FD8583E3F4BA58CA	
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="58.58"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1187.93"/>
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 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

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 431.46	Transaction ID: D703363A20B0E44A7A6C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 431.46

1) SUBTOTALS This Period This Page (optional).....	1425.03
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 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

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 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

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 622.51	Transaction ID: DA75CCBF704CB4716B86	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 622.51

1) SUBTOTALS This Period This Page (optional).....	▶	1406.60
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 1055.11		Transaction ID: D561E5E0579E7422A8F4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1055.11	

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 Landover	State MD	ZIP Code 20785	

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

C. 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 130.00		Transaction ID: D8B59DA12044449C0AE9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1345.35
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 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

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 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

C. 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 State ZIP Code Washington DC 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

1) SUBTOTALS This Period This Page (optional).....	8592.52
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 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	

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 6277.73		Transaction ID: D0A801840ADAA424FBBF4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6277.73	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jim VanDusseldorp			Nature of Debt (Purpose): Bus Servicing
Mailing Address 2406 15th Ave. N.			
City Clear Lake	State IA	ZIP Code 50428-2037	

Outstanding Balance Beginning This Period 92.50		Transaction ID: DECE5259C4BB240ADBB7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 92.50	

1) SUBTOTALS This Period This Page (optional).....	6392.51
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 / 42
	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 Peter Nichols	Nature of Debt (Purpose): Consulting Fee
Mailing Address 222 Stony Brook Road	
City State ZIP Code Hopewell NJ 08525-3003	

Outstanding Balance Beginning This Period 15000.00	Transaction ID: DE18E31E6A6564CF4B75	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00

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 State ZIP Code Des Moines IA 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 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 32233.24	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	15153.50
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 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

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 1199.40	Transaction ID: DF4C21A8864FF4D46B53	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1199.40

C. 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

1) SUBTOTALS This Period This Page (optional).....	24509.35
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 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	

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 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	

1) SUBTOTALS This Period This Page (optional).....	4101.17
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 39 / 42	
	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 Cedric Williams	Nature of Debt (Purpose): Car Rental
Mailing Address 4401 Aldrich Avenue S	
City State ZIP Code Minneapolis MN 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

B. 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 120.00	Transaction ID: D5880C9A067654615B51	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 120.00

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

1) SUBTOTALS This Period This Page (optional).....	▶	4979.19
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 40 / 42
	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 1205 O'Neill Highway	
City Dunmore State PA ZIP Code 18512-1723	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC	Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway	
City Dunmore State PA ZIP Code 18512-1723	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Universal Printing Company LLC	Nature of Debt (Purpose): Printing
Mailing Address 1205 O'Neill Highway	
City Dunmore State PA ZIP Code 18512-1723	

Outstanding Balance Beginning This Period 136.05	Transaction ID: DF477C3FE35E04A05B7F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 136.05

1) SUBTOTALS This Period This Page (optional).....	2811.72
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 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

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 1205 O'Neill Highway			
City Dunmore	State PA	ZIP Code 18512-1723	

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 Perkins Coie			Nature of Debt (Purpose): Yearly Consulting Fee
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor			
City Seattle	State WA	ZIP Code 98101-3099	

Outstanding Balance Beginning This Period 0.00		Transaction ID: D8CE59C7EC9C74AB89CB	
Amount Incurred This Period 60000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 60000.00	

1) SUBTOTALS This Period This Page (optional).....	▶	60896.53
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 42 / 42	
	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 Aristotle Publishing			Nature of Debt (Purpose): Subscription Fee
Mailing Address 205 Pennsylvania Ave			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period		Transaction ID: D46D39F416D6A49FD9CC	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
14000.00	0.00	14000.00	

1) SUBTOTALS This Period This Page (optional).....	14000.00
2) TOTALS This Period (last page this line number only).....	335361.78
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)	335361.78