

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 98

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

1. NAME OF COMMITTEE (in full) <b>Chris Dodd For President Inc</b>		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      Monthly Report Due On:
  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

<b>5. COVERING PERIOD</b>	<b>FROM</b> 01/01/2009	<b>THROUGH</b> 03/31/2009
---------------------------	---------------------------	------------------------------

SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	.....	196347.19
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	.....	0.39
8. SUBTOTAL (Lines 6 and 7)	.....	196347.58
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	97083.15
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	99264.43
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)	.....	134238.68
13. EXPENDITURES SUBJECT TO LIMITATION	.....	15319638.39
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	.....	9476869.95
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	.....	15324878.39

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 <b>Kathryn Damato</b>	Date 01/31/2011
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) <b>Chris Dodd For President Inc</b>	Report Covering the Period	
	From: 01/01/2009	To: 03/31/2009
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
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 .....	0.00	10078771.95
(b) Political Party Committees .....	0.00	100.00
(c) Other Political Committees .....	0.00	760698.30
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) .....	0.00	10839570.25
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	126636.07
(b) Fundraising .....	0.00	5240.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	0.00	131876.07
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....	0.39	-304702.83
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....	0.39	18670301.45
<b>II. DISBURSEMENTS</b>		
23. OPERATING EXPENDITURES .....	85583.15	15451514.46
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 .....	11500.00	1190442.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	0.00	172258.30
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....	11500.00	1362700.30
29. OTHER DISBURSEMENTS .....	0.00	11000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	97083.15	18568136.01
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>		
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 98**  
**(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	694906.41
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	2510687.16	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
Massachusetts	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
			<b>TOTALS</b>	<b>0.00</b>	<b>3237648.79</b>

**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

<b>A.</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: BC4C9C16D13394C66854 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 97.75 Category/ Type

<b>B.</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: BFEbDDADBD89A4DD8A9B Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 71.00 Category/ Type

<b>C.</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 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: B5510DEED9DBB413994C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 796.39 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	965.14
<b>TOTAL</b> 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

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

A.	Full Name (Last, First, Middle Initial) Advantage Payroll Services <hr/> Mailing Address 126 Marrow Road <hr/> City Auburn State ME Zip Code 04210 <hr/> Purpose of Disbursement Process Payroll 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: B1FB16D0BCA98405CA35 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 71.00
B.	Full Name (Last, First, Middle Initial) Advantage Payroll Services <hr/> Mailing Address 126 Marrow Road <hr/> City Auburn State ME Zip Code 04210 <hr/> Purpose of Disbursement Processing Fee 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: BA823CEF3F69E443E915 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 97.75
C.	Full Name (Last, First, Middle Initial) Advantage Payroll Services <hr/> Mailing Address 126 Marrow Road <hr/> City Auburn State ME Zip Code 04210 <hr/> Purpose of Disbursement Processing Fee 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: B4CFFC83FD82E4CCBB20 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 71.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>239.75</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule B-P ITEMIZED DISBURSEMENTS

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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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Air Charter Team, Inc.</p> <p>Mailing Address 10015 N.W. Ambasssador Drive Suite 202</p> <p>City Kansas City State MO Zip Code 64153</p> <p>Purpose of Disbursement repayment of debt</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><b>Transaction ID:</b> BDF6F6E74B0814A45888</p> <p>Date of Disbursement 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1304.61</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Alliant Energy</p> <p>Mailing Address PO Box 3066</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement repayment of debt</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><b>Transaction ID:</b> BD876D052460940E1912</p> <p>Date of Disbursement 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 239.60</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alliant Energy</p> <p>Mailing Address PO Box 3066</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement repayment of debt</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><b>Transaction ID:</b> B809883B74A734012A1C</p> <p>Date of Disbursement 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 263.55</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1807.76

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

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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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

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

A.	Full Name (Last, First, Middle Initial) Alliant Energy  Mailing Address PO Box 3066  City Cedar Rapids State IA Zip Code 52406  Purpose of Disbursement repayment of debt 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: B032859B6EAB744D283C Date of Disbursement 02 / 13 / 2009  Amount of Each Disbursement this Period 540.80
B.	Full Name (Last, First, Middle Initial) Alliant Energy  Mailing Address PO Box 3066  City Cedar Rapids State IA Zip Code 52406  Purpose of Disbursement repayment of debt 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: BBAC556FDBE26468A8A1 Date of Disbursement 02 / 13 / 2009  Amount of Each Disbursement this Period 401.72
C.	Full Name (Last, First, Middle Initial) Alliant Energy  Mailing Address PO Box 3066  City Cedar Rapids State IA Zip Code 52406  Purpose of Disbursement repayment of debt 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: B61A3BDF7BAD247BBB88 Date of Disbursement 02 / 13 / 2009  Amount of Each Disbursement this Period 50.75

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

993.27

**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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Alliant Energy</p> <p>Mailing Address PO Box 3066</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement repayment of debt</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: BE8A915782CF3435EAFA</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="852.59"/></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>B.</b></p> <p>Full Name (Last, First, Middle Initial) Alliant Energy</p> <p>Mailing Address PO Box 3066</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement repayment of debt</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: B945128A8CCE041138E4</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="254.12"/></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>C.</b></p> <p>Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address Washington Union Station 60 Massachusetts Ave</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Transportation</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: B5268B124AA9443C6865</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="98.00"/></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>

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**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 9 / 98

<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

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

<p><b>A.</b></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 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>Transaction ID: BC57797FEA0B04E05BF7</p> <p>Date of Disbursement 02 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1119.97</p> <p>Category/Type</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Aristotle Publishing</p> <p>Mailing Address 205 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Subscription 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>Transaction ID: B25B67640F69D4871921</p> <p>Date of Disbursement 03 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 6000.00</p> <p>Category/Type</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Aristotle Publishing</p> <p>Mailing Address 205 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generation of report writer</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: B0FE713734D6E4B4CBE8</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 800.00</p> <p>Category/Type</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7919.97

**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)

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<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

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60572 Purpose of Disbursement depayment of debt 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) ▼	<b>Transaction ID:</b> B251399BB76BE46F1843 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 304.30
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60572 Purpose of Disbursement repayment of debt 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) ▼	<b>Transaction ID:</b> BFB4E2D286D95434BB99 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 111.80
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60572 Purpose of Disbursement repayment of debt 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) ▼	<b>Transaction ID:</b> B4796D583E5864AA0817 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 1861.62

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2277.72</b>
<b>TOTAL</b> 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)

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<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Authorize.net <hr/> Mailing Address 915 South 500 East, Ste. 200 <hr/> City American Fork State UT Zip Code 84003-3373 <hr/> Purpose of Disbursement Fee 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: B83A6B422AC5A4A38826 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Authorize.net <hr/> Mailing Address 915 South 500 East, Ste. 200 <hr/> City American Fork State UT Zip Code 84003-3373 <hr/> Purpose of Disbursement Fee 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: B50661AE5B526435AB95 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Authorize.net <hr/> Mailing Address 915 South 500 East, Ste. 200 <hr/> City American Fork State UT Zip Code 84003-3373 <hr/> Purpose of Disbursement Fee 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: BA04FDC6F057147D4914 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	75.00
<b>TOTAL</b> 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)

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<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 830175 Acct Analysis  City Dallas State TX Zip Code 75283-0175  Purpose of Disbursement Monthly 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: B32A4C2EA448C48A8A4E Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 9  Amount of Each Disbursement this Period 248.04
<b>B.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 830175 Acct Analysis  City Dallas State TX Zip Code 75283-0175  Purpose of Disbursement Chargeback Charge 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: BD9616061F35E4625B39 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9  Amount of Each Disbursement this Period 33.44
<b>C.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 830175 Acct Analysis  City Dallas State TX Zip Code 75283-0175  Purpose of Disbursement Analysis 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: B388C1399478D4EAF827 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9  Amount of Each Disbursement this Period 348.74

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

630.22

**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)

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<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 830175 Acct Analysis <hr/> City Dallas State TX Zip Code 75283-0175 <hr/> Purpose of Disbursement Wire Charge 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: BD45B17B80E874A70B83 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 20.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) BankCard <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Fee 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: B5753A8791F23445C836 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 34.95
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) BankCard <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Fee 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: B4F033148BD894DC5BCE Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 34.95
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

89.90

**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)

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<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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BankCard</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9370A69F35F74DD48A9</p> <p>Date of Disbursement MM / DD / YYYY 03 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 34.95</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Big Ten Rentals, Inc.</p> <p>Mailing Address 1820 Boyrum St</p> <p>City Iowa City State IA Zip Code 52240-4555</p> <p>Purpose of Disbursement Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BAAF38429FB3341F29A7</p> <p>Date of Disbursement MM / DD / YYYY 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 93.28</p> <p>[MEMO ITEM]</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bi-State Cartridge Service, Inc.</p> <p>Mailing Address 1325 15th Street</p> <p>City Moline State IL Zip Code 61265</p> <p>Purpose of Disbursement repayment of debt</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B389864F0230646C7B35</p> <p>Date of Disbursement MM / DD / YYYY 02 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 130.54</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

165.49

**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

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

A.	Full Name (Last, First, Middle Initial) Calling Cards <hr/> Mailing Address 11757 Katy Frwy, Ste. 390 <hr/> City Houston State TX Zip Code 77079 <hr/> Purpose of Disbursement Conference Calls 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: B83A150C2B66B413BAA5 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 120.00 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Calling Cards <hr/> Mailing Address 11757 Katy Frwy, Ste. 390 <hr/> City Houston State TX Zip Code 77079 <hr/> Purpose of Disbursement Conference Calls 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: BE3F17AC7C6764160BA5 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 40.00 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Cedar Rapids Municipal Utilities <hr/> Mailing Address PO Box 3255 <hr/> City Cedar Rapids State IA Zip Code 52406 <hr/> Purpose of Disbursement repayment of debt 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: B56365BCEC24743EA93B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 57.90

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	57.90
<b>TOTAL</b> 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)

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<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

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

A.	Full Name (Last, First, Middle Initial) Cedar Rapids Municipal Utilities  Mailing Address PO Box 3255  City Cedar Rapids State IA Zip Code 52406  Purpose of Disbursement repayment of debt 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: B58D7ABE4B49A40D1822 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9  Amount of Each Disbursement this Period 165.81
B.	Full Name (Last, First, Middle Initial) Charles George Trucking Co., Inc.  Mailing Address PO Box 857  City Londonberry State NH Zip Code 03053  Purpose of Disbursement Utilities 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: B9109CC30B7DC400AB1C Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8  Amount of Each Disbursement this Period 535.52  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Comcast  Mailing Address 508-D S Van Dorn Street  City Alexandria State VA Zip Code 22304  Purpose of Disbursement Cable Service 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: B49853ACE816A407EAA9 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 171.70  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	165.81
<b>TOTAL</b> 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)

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<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

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

A.	Full Name (Last, First, Middle Initial) Country Inn Hotel  Mailing Address 1202 Highway 9 West  City Decorah State IA Zip Code 52101-2459  Purpose of Disbursement Lodging 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: BE3D93B91C7FF4F9CBF0 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 862.34  <b>[MEMO ITEM]</b>
B.	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: B51D891B4D3614ED1BF0 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 302.42
C.	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: BE71A992DC6404488A2E Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9  Amount of Each Disbursement this Period 302.42

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**604.84**

**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)

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<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B3B4CCC1946ED4AB7AEC</p> <p>Date of Disbursement 02 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 302.42</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BFB226445CFE0499DAE2</p> <p>Date of Disbursement 02 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 302.42</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BC3A85EC83C034C5B917</p> <p>Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 126.94</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

731.78

**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)

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<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

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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: B2CDBB266B65F4741B0F Date of Disbursement 03 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 126.94
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 Increase of tax rate 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: B4045933A38214AE1A95 Date of Disbursement 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 198.35
C.	Full Name (Last, First, Middle Initial) DC Dept Taxation <hr/> Mailing Address P.O. Box 470 <hr/> City Washington State DC Zip Code 20044 <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: BFD765C40DEC34AB2AE1 Date of Disbursement 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 4480.01

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**4805.30**

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

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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

A.	Full Name (Last, First, Middle Initial) Deaf Services Unlimited  Mailing Address Suite 170  City Des Moines State IA Zip Code 50309  Purpose of Disbursement repayment of debt 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: B204511F58E534BDC88F Date of Disbursement 02 / 13 / 2009  Amount of Each Disbursement this Period 130.00
B.	Full Name (Last, First, Middle Initial) Des Moines Water Works  Mailing Address 2201 George Flagg Parkway  City Des Moines State IA Zip Code 50321-1190  Purpose of Disbursement repayment of debt 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: BFFBAED9C853D4A7881A Date of Disbursement 02 / 13 / 2009  Amount of Each Disbursement this Period 117.91
C.	Full Name (Last, First, Middle Initial) Discover  Mailing Address P.O. Box 3016  City New Albany State OH Zip Code 43054  Purpose of Disbursement 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: BE5048F8AA5A64C65BCC Date of Disbursement 01 / 02 / 2009  Amount of Each Disbursement this Period 10.59

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

258.50

**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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Drink More Water</p> <p>Mailing Address: Montgomery County Airpark 7595-A Rickenbacker Drive</p> <p>City: Gaithersburg State: MD Zip Code: 20879</p> <p>Purpose of Disbursement: Water Delivery</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><b>Transaction ID:</b> BADC72369DB6F4DD8BD1</p> <p>Date of Disbursement: 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period: 15.50</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Drink More Water</p> <p>Mailing Address: Montgomery County Airpark 7595-A Rickenbacker Drive</p> <p>City: Gaithersburg State: MD Zip Code: 20879</p> <p>Purpose of Disbursement: Water Delivery</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><b>Transaction ID:</b> BAE32EE3651BC45AF81B</p> <p>Date of Disbursement: 02 / 14 / 2008</p> <p>Amount of Each Disbursement this Period: 23.96</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Enterprise Rent-a-Car</p> <p>Mailing Address: 524 14th Street</p> <p>City: Des Moines State: IA Zip Code: 50309-3104</p> <p>Purpose of Disbursement: Transportation</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><b>Transaction ID:</b> B2124C8B47AAD4CAC8FA</p> <p>Date of Disbursement: 01 / 05 / 2008</p> <p>Amount of Each Disbursement this Period: 3087.35</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**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)

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<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

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

A.	Full Name (Last, First, Middle Initial) Extra Space Storage <hr/> Mailing Address 132 Silas Deane Highway <hr/> City Wethersfield State CT Zip Code 06109 <hr/> Purpose of Disbursement Storage 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: BE672813AE662472ABE1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.70 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) ExxonMobil <hr/> Mailing Address P.O. Box 688938 <hr/> City Des Moines State IA Zip Code 50368-8938 <hr/> Purpose of Disbursement repayment of debt 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: B21E321929DC947238B5 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 429.36
C.	Full Name (Last, First, Middle Initial) ExxonMobil <hr/> Mailing Address P.O. Box 688938 <hr/> City Des Moines State IA Zip Code 50368-8938 <hr/> Purpose of Disbursement repayment of debt 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: BC606870D890C416C95E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 241.86

SUBTOTAL of Disbursements This Page (optional) ..... ▶

671.22

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:  
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<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

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

A.	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B8D09FE162BF64892ACF Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 8  Amount of Each Disbursement this Period 72.66  [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B7A57885528254583A82 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 8  Amount of Each Disbursement this Period 21.15  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B17E2C5A14EAD446F951 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8  Amount of Each Disbursement this Period 20.92  [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶

0.00

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

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<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B96D9D5BFBE124BBFA3D Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 8  Amount of Each Disbursement this Period 20.92  [MEMO ITEM]
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: BBE9068E76DF84D9890C Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8  Amount of Each Disbursement this Period 29.74  [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B6ECF38AD044640398F2 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8  Amount of Each Disbursement this Period 25.21  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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FOR LINE NUMBER:  
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<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: BDDE547E8566347F7971 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8  Amount of Each Disbursement this Period 22.08  <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B6B1CDAC9100D4B1385B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 32.59  <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: B93E7EC5630804746B2B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8  Amount of Each Disbursement this Period 27.29  <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# Schedule B-P ITEMIZED DISBURSEMENTS

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<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address P.O. Box 371461  City Pittsburgh State PA Zip Code 15250-7461  Purpose of Disbursement Courier Services 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: BCCACDA57EFCD4D57979 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8  Amount of Each Disbursement this Period 33.62  <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Free Media, Inc.  Mailing Address 777 West End Avenue #5C  City New York State NY Zip Code 10025  Purpose of Disbursement repayment of debt 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: B5BB09F0640F24BE3AD6 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9  Amount of Each Disbursement this Period 635.01
<b>C.</b>	Full Name (Last, First, Middle Initial) Frontline Productions  Mailing Address 125 Hemlock Drive  City Deep River State CT Zip Code 06417  Purpose of Disbursement repayment of debt 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: BCD69B595E04B4325AFA Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9  Amount of Each Disbursement this Period 885.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1520.01

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P ITEMIZED DISBURSEMENTS

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<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

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

A.	Full Name (Last, First, Middle Initial) Furniture Options Mailing Address 8191 Birchwood Court, Ste. A City Johnston State IA Zip Code 50131-2931 Purpose of Disbursement Equipment Rental 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: B6BC0839CDF114C9A8E1 Date of Disbursement 01 / 08 / 2008 Amount of Each Disbursement this Period 404.79 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Google.com Mailing Address 1600 Amphitheatre Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement Advertising 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: BB4E5B06DBAF14516B5F Date of Disbursement 01 / 27 / 2008 Amount of Each Disbursement this Period 5.00 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Hampton Inn Mailing Address 3583 ST. Mathews Road City Orangeburg State SC Zip Code 29118 Purpose of Disbursement Lodging 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: B854D079054864BA098B Date of Disbursement 01 / 05 / 2008 Amount of Each Disbursement this Period 120.99 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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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

<b>A.</b>	Full Name (Last, First, Middle Initial) Hertz  Mailing Address 333 W. Harbor Drive  City San Diego State CA Zip Code 92101  Purpose of Disbursement Transportation 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: B8995E42888A84E98956 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8  Amount of Each Disbursement this Period 3956.42  [MEMO ITEM]
<b>B.</b>	Full Name (Last, First, Middle Initial) Hertz  Mailing Address 333 W. Harbor Drive  City San Diego State CA Zip Code 92101  Purpose of Disbursement Transportation 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: B0F26C17CC1824D779B8 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8  Amount of Each Disbursement this Period 802.72  [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) Hertz  Mailing Address 333 W. Harbor Drive  City San Diego State CA Zip Code 92101  Purpose of Disbursement Transportation 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: BDFA2C18FF02245E18AE Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 8  Amount of Each Disbursement this Period 245.92  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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<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

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

A.	Full Name (Last, First, Middle Initial) Hertz  Mailing Address 333 W. Harbor Drive  City San Diego State CA Zip Code 92101  Purpose of Disbursement Transportation 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: B0B1FBA3781B94C9081F Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 8  Amount of Each Disbursement this Period 997.79  <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Hinckley Springs  Mailing Address P.O. Box 660579  City Dallas State TX Zip Code 75266-0579  Purpose of Disbursement repayment of debt 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: BCFA892D8BF6F4D86863 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9  Amount of Each Disbursement this Period 306.68
C.	Full Name (Last, First, Middle Initial) Home Depot  Mailing Address 2455 Falls Ferry Road  City Atlanta State GA Zip Code 30339  Purpose of Disbursement Supplies 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: B883E0216CD6E4765ADD Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 7  Amount of Each Disbursement this Period -232.03  <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

306.68

**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)

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<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

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

A.	Full Name (Last, First, Middle Initial) Hotel Vetro	Transaction ID: B55AB57EE36A54C94B1E
	Mailing Address 201 South Linn Street	Date of Disbursement MM / DD / YYYY 01 / 04 / 2008
	City Iowa City State IA Zip Code 52240	Amount of Each Disbursement this Period 31.46
	Purpose of Disbursement Lodging	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Hotel Vetro	Transaction ID: BDC5CFEF2958E4655808
	Mailing Address 201 South Linn Street	Date of Disbursement MM / DD / YYYY 01 / 08 / 2008
	City Iowa City State IA Zip Code 52240	Amount of Each Disbursement this Period 203.52
	Purpose of Disbursement Lodging	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Hotwire	Transaction ID: B331139E6E85A46318D0
	Mailing Address 333 Market Street Suite 100	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City San Francisco State CA Zip Code 94105	Amount of Each Disbursement this Period 159.43
	Purpose of Disbursement Lodging	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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

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

A.	Full Name (Last, First, Middle Initial) Iowa Bakery Cafe  Mailing Address 4040 University Avenue A  City Des Moines State IA Zip Code 50311-3559  Purpose of Disbursement Food & Beverage 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: B2D108A5CF2E14EFDA12 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8  Amount of Each Disbursement this Period 29.53  [MEMO ITEM]
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: B43129067DA994257A8C Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 950.50
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: BB34211D70458441EB03 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9  Amount of Each Disbursement this Period 950.03

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1900.53

**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)

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<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

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

<b>A.</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: B39CA30E51A914A8B9B5 Date of Disbursement 02 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 940.05
<b>B.</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: B8FEEB7A0CB174B0D935 Date of Disbursement 02 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 928.03
<b>C.</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: BA5F0BDC9451048AD87E Date of Disbursement 03 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 383.92

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2252.00
<b>TOTAL</b> 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)

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<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

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

<b>A.</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: B31D2BA970FA74C258E0 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 365.05
<b>B.</b>	Full Name (Last, First, Middle Initial) Koch Brothers <hr/> Mailing Address 325 Grand Avenue P.O. Box 1755 <hr/> City Des Moines State IA Zip Code 50306 <hr/> Purpose of Disbursement repayment of debt 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: B3936ED1535924D4580D Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 211.99
<b>C.</b>	Full Name (Last, First, Middle Initial) Koch Brothers <hr/> Mailing Address 325 Grand Avenue P.O. Box 1755 <hr/> City Des Moines State IA Zip Code 50306 <hr/> Purpose of Disbursement repayment of debt 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: BCEAC4FE326FF4025AEE Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 126.82

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**703.86**

**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)

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<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

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

A.	Full Name (Last, First, Middle Initial) La Quinta Inn & Suites	Transaction ID: B669A57304E6F443EB6E
	Mailing Address 909 Hidden Ridge, Suite 600	Date of Disbursement MM / DD / YYYY 01 / 05 / 2008
	City Irving State TX Zip Code 75038	Amount of Each Disbursement this Period 1881.60
	Purpose of Disbursement Lodging	[MEMO ITEM]
	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) ▼	

B.	Full Name (Last, First, Middle Initial) La Quinta Inn & Suites	Transaction ID: B995D3CBC64BA4C9F83D
	Mailing Address 909 Hidden Ridge, Suite 600	Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
	City Irving State TX Zip Code 75038	Amount of Each Disbursement this Period 84.00
	Purpose of Disbursement Lodging	[MEMO ITEM]
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: B129F8D44AB9E42F98FF
	Mailing Address P.O. Box 933	Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
	City Dayton State OH Zip Code 45401	Amount of Each Disbursement this Period 475.88
	Purpose of Disbursement Research Software	[MEMO ITEM]
	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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mason City Public Utilities <hr/> Mailing Address 10 First Street Northwest <hr/> City Mason City State IA Zip Code 50401-3224 Purpose of Disbursement repayment of debt 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: B2B1A8E77381843D481F Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 123.36
<b>B.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 Purpose of Disbursement repayment of debt 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: B04C477CEBF68483D8B1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1406.57
<b>C.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 Purpose of Disbursement repayment of debt 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: B5E1421E2B080474A87E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 65.24

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1595.17

**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)

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<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BDDC438C0B72641F7B85 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 416.01
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: B5411101D738A4F079B6 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 196.90
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BEDB67C053C374887B50 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 123.36
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

736.27

**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

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(check only one)

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<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BC023DE5035764AA3BFD Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 659.58
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: BEEBB1F8B909F460785C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 72.04
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy <hr/> Mailing Address P.O. Box 8020 <hr/> City Davenport State IA Zip Code 52808-8020 <hr/> Purpose of Disbursement repayment of debt 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: B7BC11ECB834E41B9B29 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1115.75
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1847.37

**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)

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<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

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

A.	Full Name (Last, First, Middle Initial) NexGen  Mailing Address 10500 Hickman Road Ste J  City Clive State IA Zip Code 50325-3706  Purpose of Disbursement repayment of debt 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: BF2B253D4470D4F1CB18 Date of Disbursement 02 / 17 / 2009  Amount of Each Disbursement this Period 224.86
B.	Full Name (Last, First, Middle Initial) Northern Business Machines  Mailing Address 24 Terry Avenue  City Burlington State MA Zip Code 01803  Purpose of Disbursement repayment of debt 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: BC27D1BE3CB1C4F92817 Date of Disbursement 02 / 17 / 2009  Amount of Each Disbursement this Period 698.00
C.	Full Name (Last, First, Middle Initial) Northland Trumbull, LLC  Mailing Address C/o Northland Investment Corporati P.O. Box 845604  City Boston State MA Zip Code 02284  Purpose of Disbursement repayment of debt 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: BC50B2186FE904BD8AB3 Date of Disbursement 02 / 17 / 2009  Amount of Each Disbursement this Period 3850.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶

4772.86

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)

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<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Northland Trumbull, LLC	Transaction ID: B093D04DD3BF34836A6E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Mailing Address C/o Northland Investment Corporati P.O. Box 845604
City Boston State MA Zip Code 02284	Amount of Each Disbursement this Period 3850.00
Purpose of Disbursement repayment of debt 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>B.</b> Full Name (Last, First, Middle Initial) Northland Trumbull, LLC	Transaction ID: B5E6583D84CAF43F9908 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Mailing Address C/o Northland Investment Corporati P.O. Box 845604
City Boston State MA Zip Code 02284	Amount of Each Disbursement this Period 3850.00
Purpose of Disbursement repayment of debt 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>C.</b> Full Name (Last, First, Middle Initial) pair Networks, Inc.	Transaction ID: B9BBF14EBA7A04CF8990 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8
	Mailing Address 2403 Sidney St. Suite 210
City Pittsburgh State PA Zip Code 15203	Amount of Each Disbursement this Period 398.94
Purpose of Disbursement Computer/Data 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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7700.00
<b>TOTAL</b> 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)

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<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pitney Bowes Inc. PAC</p> <p>Mailing Address Pitney Bowes World Headquarters 1 Elmcroft Road</p> <p>City Stamford State CT Zip Code 06926</p> <p>Purpose of Disbursement re-issue of check 10637</p> <p>Candidate Name Pitney Bowes Inc. PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BF10D8DB5D818426180A</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) PMI</p> <p>Mailing Address Parking Management, Inc. 1725 DeSales Street NW</p> <p>City Washington State DC Zip Code 20036-4406</p> <p>Purpose of Disbursement repayment of debt</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B059AD2581AEE4DF5914</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 465.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Pratt AV</p> <p>Mailing Address 333 SW 9th Street, Ste N</p> <p>City Des Moines State IA Zip Code 50309-4440</p> <p>Purpose of Disbursement AV Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BCFAB80C93F8F4744832</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 2482.45</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5465.00

**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)

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<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

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

A.	Full Name (Last, First, Middle Initial) Pratt AV  Mailing Address 333 SW 9th Street, Ste N  City Des Moines State IA Zip Code 50309-4440  Purpose of Disbursement AV Equipment 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: B1C27CB5F927C4D1BB73 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8  Amount of Each Disbursement this Period 96.62  [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Premiere Global Services  Mailing Address Data Communications Division 1268 Paysphere Circle  City Chicago State IL Zip Code 60674  Purpose of Disbursement Blast Faxing 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: B956E85D3C8BD49329FE Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 8  Amount of Each Disbursement this Period 746.39  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Public Service of New Hampshire  Mailing Address P.O. Box 360  City Manchester State NH Zip Code 03105-0360  Purpose of Disbursement repayment of debt 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: B2A15666D6B3A4F46AFD Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9  Amount of Each Disbursement this Period 246.08

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

246.08

**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

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(check only one)

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<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

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

A.	Full Name (Last, First, Middle Initial) Public Service of New Hampshire  Mailing Address P.O. Box 360  City Manchester State NH Zip Code 03105-0360  Purpose of Disbursement repayment of debt 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: BD090013659F84A56B54 Date of Disbursement 02 / 17 / 2009  Amount of Each Disbursement this Period 376.44
B.	Full Name (Last, First, Middle Initial) Public Service of New Hampshire  Mailing Address P.O. Box 360  City Manchester State NH Zip Code 03105-0360  Purpose of Disbursement repayment of debt 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: B465B72A9F3CC4ED382D Date of Disbursement 02 / 17 / 2009  Amount of Each Disbursement this Period 993.78
C.	Full Name (Last, First, Middle Initial) Public Service of New Hampshire  Mailing Address P.O. Box 360  City Manchester State NH Zip Code 03105-0360  Purpose of Disbursement repayment of debt 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: BE4D68898AE384CAFBB7 Date of Disbursement 02 / 17 / 2009  Amount of Each Disbursement this Period 131.82

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1502.04

**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

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(check only one)

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<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

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

A.	Full Name (Last, First, Middle Initial) Residence Inn by Marriott Mailing Address 10400 Fernwood Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement Lodging 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: B36EDB348CA754CCA892 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 373.30 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Ristorante Luigino Mailing Address 1100 New York Ave., NW City Washington State DC Zip Code 20005 Purpose of Disbursement Food & Beverage 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: B26C9915987804E479BD Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 59.40 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Simard Printing Mailing Address 300 Salem Street City Woburn State MA Zip Code 01801-2055 Purpose of Disbursement repayment of debt 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: B9B4D491BD6DB4ECBB0B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 433.13

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

433.13

**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)

<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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36657</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Airfare</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: B8C429C3ACD844E028E8</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 257.00</p> <p>[MEMO ITEM]</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</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: B4C04E8AB305D4F50AB3</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 21.15</p> <p>[MEMO ITEM]</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</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: B0C9628DB4E1C4F388B1</p> <p>Date of Disbursement 01 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 171.32</p> <p>[MEMO ITEM]</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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

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(check only one)

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<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</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><b>Transaction ID:</b> B837C520E1904424A860</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 59.20</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Hotel Fort Des Moines</p> <p>Mailing Address 1000 Walnut Street</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Lodging</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><b>Transaction ID:</b> B0D3CB0794733449CAFC</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 399.22</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Kirkwood</p> <p>Mailing Address 400 Walnut Street</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement repayment of debt</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><b>Transaction ID:</b> B40521F3187FE453EBA6</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 757.17</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

757.17

**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

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(check only one)

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<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Printer Works</p> <p>Mailing Address 3481 Arden Road</p> <p>City Hayward State CA Zip Code 94545</p> <p>Purpose of Disbursement repayment of debt</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BBBB3B592A56A4D35A6A</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 819.44</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) TiVo Inc.</p> <p>Mailing Address 2160 Gold Street P.O. Box 2160</p> <p>City Alviso State CA Zip Code 95002-2160</p> <p>Purpose of Disbursement Cable</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B811C4B985D334CC48BB</p> <p>Date of Disbursement MM / DD / YYYY 01 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 25.09</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) TiVo Inc.</p> <p>Mailing Address 2160 Gold Street P.O. Box 2160</p> <p>City Alviso State CA Zip Code 95002-2160</p> <p>Purpose of Disbursement Cable Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B04BF03591FDE42F69D0</p> <p>Date of Disbursement MM / DD / YYYY 02 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 12.95</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

844.53

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

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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(check only one)

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<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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) TiVo Inc.</p> <p>Mailing Address 2160 Gold Street P.O. Box 2160</p> <p>City Alviso State CA Zip Code 95002-2160</p> <p>Purpose of Disbursement Cable Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B339B6BB983E44ABB8CF</p> <p>Date of Disbursement 02 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 29.90</p> <p>[MEMO ITEM]</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) TiVo Inc.</p> <p>Mailing Address 2160 Gold Street P.O. Box 2160</p> <p>City Alviso State CA Zip Code 95002-2160</p> <p>Purpose of Disbursement Cable Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1E3439F6704648D8A9E</p> <p>Date of Disbursement 02 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 16.95</p> <p>[MEMO ITEM]</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) U Save Auto Rental</p> <p>Mailing Address 200 Prospect Avenue</p> <p>City Hartford State CT Zip Code 06106-2928</p> <p>Purpose of Disbursement Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B6336D26D851E4068B44</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period -1056.41</p> <p>[MEMO ITEM]</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Unitil  Mailing Address PO BOX 2013  City Concord State NH Zip Code 03302  Purpose of Disbursement repayment of debt 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: BACD1C6A652CF46E29D8 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period 115.06
<b>B.</b>	Full Name (Last, First, Middle Initial) UPS  Mailing Address PO Box 7247-0244  City Philadelphia State PA Zip Code 19170  Purpose of Disbursement repayment of debt 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: BFBDC3C6FD88A4C03A73 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period 86.50
<b>C.</b>	Full Name (Last, First, Middle Initial) UPS  Mailing Address PO Box 7247-0244  City Philadelphia State PA Zip Code 19170  Purpose of Disbursement repayment of debt 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: B53BFFC443FE14D56A1F Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period 60.76

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>262.32</b>
<b>TOTAL</b> 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)

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<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement repayment of debt 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: BF18B6504A1F5412585B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 126.91
<b>B.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement repayment of debt 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: BC98F334CE5C946FEBA3 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 59.43
<b>C.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement repayment of debt 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: BBBD50EFE7E274321A3B Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 427.18

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**613.52**

**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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement repayment of debt 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: B3DEBB37637764932913 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 434.09
<b>B.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Courier 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: BD97255E2681D4084AC7 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 55.95  <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Shipping 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: BFB4DFF094928472BB0C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 91.91  <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	434.09
<b>TOTAL</b> 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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Shipping Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B86B018924D094788A81 Date of Disbursement 02 / 10 / 2008 <hr/> Amount of Each Disbursement this Period 64.03 <hr/> <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement Shipping Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B362980E54A764268858 Date of Disbursement 02 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 86.50 <hr/> <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) US Airways <hr/> Mailing Address 1601 K Street, NW <hr/> City Washington State DC Zip Code 06107 <hr/> Purpose of Disbursement Airfare Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B034D54E635E54138803 Date of Disbursement 02 / 06 / 2008 <hr/> Amount of Each Disbursement this Period 214.00 <hr/> <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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<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

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

A.	Full Name (Last, First, Middle Initial) US Airways <hr/> Mailing Address 1601 K Street, NW <hr/> City Washington State DC Zip Code 06107 <hr/> Purpose of Disbursement Airfare 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: BBD6C5A838E544DD9BD4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.00 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 12 Crossroads Plaza <hr/> City West Hartford State CT Zip Code 06117 <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: BC7863F2E0394426AB34 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3.00 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) USRental.com <hr/> Mailing Address 970 Summer Street <hr/> City Stamford State CT Zip Code 06905-5542 <hr/> Purpose of Disbursement repayment of debt 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: BCAFD072FE9FD4C8EAB4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4658.70

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4658.70

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) USRental.com <hr/> Mailing Address 970 Summer Street <hr/> City State Zip Code Stamford CT 06905-5542 <hr/> Purpose of Disbursement Computer Rental 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: BBAA4F92130F74674B37 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4658.70 <hr/> <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address P.O. Box 15041 <hr/> City State Zip Code Worcester MA 01615-0023 <hr/> Purpose of Disbursement Telephones 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: B27F08A8390DA4B5B8EF Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4105.19 <hr/> <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 660720 <hr/> City State Zip Code Dallas TX 75266 <hr/> Purpose of Disbursement Telephone 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: B9AC6C06A418646159CC Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 23.84 <hr/> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4105.19

**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

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

<p><b>A.</b> 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 Monthly Phone Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B983F8E4487464E31BD8</p> <p>Date of Disbursement MM / DD / YYYY 02 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 17797.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Voxel.net inc</p> <p>Mailing Address 29 Broadway, 30th Floor</p> <p>City New York State NY Zip Code 10006-3216</p> <p>Purpose of Disbursement Web Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BBCA3E2B6E5714377997</p> <p>Date of Disbursement MM / DD / YYYY 01 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2459.50</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Washington Promotions &amp; Printing</p> <p>Mailing Address 5125 MacArthur Blvd. NW Suite 14</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement repayment of debt</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4982DFD64E644B45848</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 5547.90</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5547.90

**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)

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<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wired for Change, Inc.</p> <p>Mailing Address 1700 Connecticut Ave., NW Suite 403</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement repayment of debt</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B50095CB6A00241298F2</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p><b>B.</b> 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 State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BED6C2B1EFD3B468CB9C</p> <p>Date of Disbursement 01 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 1903.16</p>
<p><b>C.</b> 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 State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BC4F5653E9A2F4C9EBFE</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1903.17</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7806.33

**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)

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<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

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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 State Zip Code  
West Hartford CT 06117-2903

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: BFEA0485576FE4F5899C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1074.83

SUBTOTAL of Disbursements This Page (optional) .....

1074.83

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

85514.15

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 98

<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 checked="" 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)  
Stanford Financial Receiver

Transaction ID: B2B6CDA9867D6483CAB9

Date of Disbursement

Mailing Address Ralph S. Janvey  
2100 Ross Avenue

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

City Dallas State TX Zip Code 75201-2739

Amount of Each Disbursement this Period

11500.00
----------

Purpose of Disbursement  
Refund

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

11500.00
----------

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

11500.00
----------

**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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 958.74		<b>Transaction ID: D06FE0A4EF1384B299BD</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 958.74	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 335.50		<b>Transaction ID: D079F7773ED3A429F995</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 335.50	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 320.68		<b>Transaction ID: DAB48C0D1D9BF48E2819</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 320.68	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	1614.92
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: D684E05F5028F4B9FA8C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1646.22	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DC05308729895455AAF0</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 647.11	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 896.07		<b>Transaction ID: D03866EA927C6487BAA8</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 896.07	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	3189.40
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: D7AA2635D35294D99959</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 694.96	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: D14F42980C9EF465D8A0</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1036.46	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 669.82		<b>Transaction ID: D6224518C358E4E34936</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 669.82	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2401.24
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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

<b>A.</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 657.85	<b>Transaction ID: D160BB52601F3469FBFA</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 657.85

<b>B.</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 471.50	<b>Transaction ID: DE70EBFB35F4E4F5BBA8</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 471.50

<b>C.</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 58.58	<b>Transaction ID: DC07FD8583E3F4BA58CA</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 58.58

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>1187.93</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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

<b>A.</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 418.15	<b>Transaction ID:</b> DA397374A80A8418D9FD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 418.15

<b>B.</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	<b>Transaction ID:</b> DA3182C7E844C4F039CE	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 575.42

<b>C.</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 431.46	<b>Transaction ID:</b> D703363A20B0E44A7A6C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 431.46

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>1425.03</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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	<b>Transaction ID:</b> DE2EA2BD913EF4C59A0F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 106.73

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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	<b>Transaction ID:</b> DA75CCBF704CB4716B86	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 622.51

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	729.24
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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:  
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 12

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID:</b> DE82D6F912C4D47CB9A5	
Amount Incurred This Period 0.00	Payment This Period 246.08	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID:</b> D5B30D2CCB1A941208DC	
Amount Incurred This Period 0.00	Payment This Period 993.78	Outstanding Balance at Close of This Period 0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID:</b> D5B0C3B4DA75E4096B6A	
Amount Incurred This Period 0.00	Payment This Period 131.82	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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 67 / 98  
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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input style="width: 100%;" type="text" value="1304.61"/>	<b>Transaction ID:</b> DCAA2DBC5CEA94CD089C
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="1304.61"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="819.44"/>	<b>Transaction ID:</b> DFC2998A4374B4E86BCA
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="819.44"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="306.68"/>	<b>Transaction ID:</b> DE674F26EC06645DDB95
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="306.68"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> 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 68 / 98  
 FOR LINE NUMBER: (check only one)  11  12

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Deaf Services Unlimited	Nature of Debt (Purpose): Interpreting Service						
Mailing Address Suite 170							
<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>50309</td> </tr> </table>	City	State	ZIP Code	Des Moines	IA	50309	
City	State	ZIP Code					
Des Moines	IA	50309					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="130.00"/>	<b>Transaction ID: DF8A44964B3424CC3B77</b>						
<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="130.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></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="130.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	
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="130.00"/>	<input style="width: 100%;" type="text" value="0.00"/>					

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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"/>	<b>Transaction ID: D7952AAF64B9C4F0997B</b>						
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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"/>					

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> UPS	Nature of Debt (Purpose): Shippng						
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>Philadephia</td> <td>PA</td> <td>19170</td> </tr> </table>	City	State	ZIP Code	Philadephia	PA	19170	
City	State	ZIP Code					
Philadephia	PA	19170					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="126.91"/>	<b>Transaction ID: D46BD2137637F4679A43</b>						
<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="126.91"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></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="126.91"/>	<input style="width: 100%;" type="text" value="0.00"/>	
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="126.91"/>	<input style="width: 100%;" type="text" value="0.00"/>					

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="106.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Simard Printing			Nature of Debt (Purpose): Printing Services
Mailing Address 300 Salem Street			
City Woburn	State MA	ZIP Code 01801-2055	

Outstanding Balance Beginning This Period 433.13		<b>Transaction ID: DAEB900B19D5343069F1</b>	
Amount Incurred This Period 0.00	Payment This Period 433.13	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DEAE CB41D358C496EAEB</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 138.02	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 416.01		<b>Transaction ID: D91E4CB1724CB455C94A</b>	
Amount Incurred This Period 0.00	Payment This Period 416.01	Outstanding Balance at Close of This Period 0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	138.02
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 70 / 98  
 FOR LINE NUMBER: (check only one)  11  12

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="1115.75"/>	<b>Transaction ID: DEC21CC9229D5404F97B</b>						
<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="1115.75"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></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="1115.75"/>	<input style="width: 100%;" type="text" value="0.00"/>	
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="1115.75"/>	<input style="width: 100%;" type="text" value="0.00"/>					

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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"/>	<b>Transaction ID: DFC448EB6B1054323A65</b>						
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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="659.58"/>	<input style="width: 100%;" type="text" value="0.00"/>					

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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"/>	<b>Transaction ID: D275E706E6F7F4C6C938</b>						
<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="72.04"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></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="72.04"/>	<input style="width: 100%;" type="text" value="0.00"/>	
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="72.04"/>	<input style="width: 100%;" type="text" value="0.00"/>					

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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"/>		<b>Transaction ID: DF30D747F375F47E5882</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="123.36"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="196.90"/>		<b>Transaction ID: DAB442CA849544E83A13</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="196.90"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="1406.57"/>		<b>Transaction ID: DB92957A464EF4AC685D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1406.57"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="65.24"/>		<b>Transaction ID: D7B3E6DAFE5CE4AFB9B8</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="65.24"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input type="text" value="910.28"/>		<b>Transaction ID: DE2E3D979014F4B2194A</b>	
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="910.28"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="130.54"/>		<b>Transaction ID: D163D453900874450889</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="130.54"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	<input type="text" value="910.28"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)

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 12

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input type="text" value="160.24"/>		<b>Transaction ID: D80871DA60A7642ADAA1</b>	
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="160.24"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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"/>		<b>Transaction ID: D8B59DA12044449C0AE9</b>	
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>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> COVAD			Nature of Debt (Purpose): Internet Services
Mailing Address Dept. 33408 PO BOX 39000			
City San Francisco	State CA	ZIP Code 94139	

Outstanding Balance Beginning This Period <input type="text" value="1535.76"/>		<b>Transaction ID: D5E78BD6138D849C8A7B</b>	
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="1535.76"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1826.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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 74 / 98  
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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input style="width: 100%;" type="text" value="1056.76"/>	<b>Transaction ID: D7FB209F7C488450BA73</b>
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="1056.76"/>

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input style="width: 100%;" type="text" value="6000.00"/>	<b>Transaction ID: D9C275736AC4E46B69DC</b>
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="6000.00"/>

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="69.00"/>	<b>Transaction ID: D0781506CE4AC48A0805</b>
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="69.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="7056.76"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Des Moines Water Works			Nature of Debt (Purpose): Utilities
Mailing Address 2201 George Flagg Parkway			
City Des Moines	State IA	ZIP Code 50321-1190	

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

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DF9E84213BC0C4FA4959</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.28	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DECE5259C4BB240ADBB7</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 92.50	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	114.78
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 76 / 98  
 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  
 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 **Transaction ID: D9F4487EF4F6F4DB6923**  
  
 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 AT&T  
 Nature of Debt (Purpose):  
 Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
 Aurora IL 60572

Outstanding Balance Beginning This Period **Transaction ID: DD45DB76A7149485EADE**  
  
 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 AT&T  
 Nature of Debt (Purpose):  
 Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
 Aurora IL 60572

Outstanding Balance Beginning This Period **Transaction ID: DFE38B3A3574543178FC**  
  
 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	<input type="text" value="150.00"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Kilkenney's			Nature of Debt (Purpose): Food & Beverage
Mailing Address 300 West 3rd Street			
City Davenport	State IA	ZIP Code 52801-1208	

Outstanding Balance Beginning This Period <input type="text" value="220.00"/>		<b>Transaction ID:</b> DE9F171102B294984BCD	
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="220.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="126.82"/>		<b>Transaction ID:</b> DFAE4308D10124EEDAE3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="126.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="211.99"/>		<b>Transaction ID:</b> D3C51D93654FD40B59BB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="211.99"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="220.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: D3A3A16E658A34B44B21</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 351.30	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DD0258CA80C884AB6960</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 239.04	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DDFA00C779CF445C8AA6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1481.16	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2071.50
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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)

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		Transaction ID: D4310E2A2AC3D49AFB1C	
400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	400.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		Transaction ID: D303F42DD72104352BB3	
241.86			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	241.86	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	597.56
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
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(Use separate schedule(s) for each numbered line) PAGE 80 / 98  
 FOR LINE NUMBER: (check only one)  11  12

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

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="429.36"/>	<b>Transaction ID:</b> D2591D51138CC454BA3F
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="429.36"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Geoff Luxenberg	<b>Nature of Debt (Purpose):</b> Reimbursement for gas & signatures
Mailing Address 249A New State Road	
City State ZIP Code Manchester CT 06042-7959	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="107.00"/>	<b>Transaction ID:</b> D8E19BDBD0BE84CDFB6C
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="107.00"/>	

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

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="224.86"/>	<b>Transaction ID:</b> D2FBA9339003447ADB22
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="224.86"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="107.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> 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)

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 <input type="text" value="400.00"/>		<b>Transaction ID: D5CA66406DA5143F7848</b>	
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"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="540.80"/>		<b>Transaction ID: D4DB84BA83BD34248B12</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="540.80"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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"/>		<b>Transaction ID: D21C371285AF1401F9CB</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="852.59"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="400.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="254.12"/>		<b>Transaction ID: D637921B16CAA45B19B6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="254.12"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="50.75"/>		<b>Transaction ID: DF36117C0589D4D9C911</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="50.75"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="401.72"/>		<b>Transaction ID: D5B3618F71E3745EC9DD</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="401.72"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 239.60		<b>Transaction ID: DE6029EBE091B415FB6D</b>	
Amount Incurred This Period 0.00	Payment This Period 239.60	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 263.55		<b>Transaction ID: DBA39930B48064589AB5</b>	
Amount Incurred This Period 0.00	Payment This Period 263.55	Outstanding Balance at Close of This Period 0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID: DF03B1B1603F54C5183C</b>	
Amount Incurred This Period 0.00	Payment This Period 635.01	Outstanding Balance at Close of This Period 0.00	

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

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

<b>A.</b> 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	<b>Transaction ID:</b> D142C4EE26CC3459DA22	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.09

<b>B.</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	<b>Transaction ID:</b> D1D76CBB4EBC7498F81D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20.81

<b>C.</b> 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	<b>Transaction ID:</b> DF8C3EA191F814F5C94C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.36

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>421.26</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 165.81		<b>Transaction ID:</b> D9457B91CEE0540E8A08	
Amount Incurred This Period 0.00	Payment This Period 165.81	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID:</b> D2FDEA7A6FB3F461FA7F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2136.07	

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

Outstanding Balance Beginning This Period 1064.16		<b>Transaction ID:</b> DBF0B293CD60A40ED8E0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1064.16	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	3200.23
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

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

Outstanding Balance Beginning This Period 378.82		Transaction ID: DF4A4422265684FB29B9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 378.82	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 153.03		Transaction ID: D40B8D89E3ABE4545B3C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 153.03	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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>1) SUBTOTALS</b> This Period This Page (optional).....	896.40
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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)

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11  
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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 5547.90		Transaction ID: DE815690D20EF4A6EB02	
Amount Incurred This Period 0.00	Payment This Period 5547.90	Outstanding Balance at Close of This Period 0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	1222.48
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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)

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

<b>A.</b> 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	

<b>B.</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	885.00	0.00	

<b>C.</b> 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	123.36	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	34.82
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

<b>A.</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		Transaction ID: D13EE948ED74B4BE0B66	
266.02			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	266.02	

<b>B.</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 San Francisco	State CA	ZIP Code 94108	

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

<b>C.</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		Transaction ID: DBAEE80A9C8F14CBF964	
19.14			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	19.14	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	822.24
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

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

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

<b>B.</b> 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 436.60	<b>Transaction ID:</b> D42D026888D4F47D198F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 436.60

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	528.97
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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: D6EB2D896D8C64BA8AA9	
60.76			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	60.76	0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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: DC7364FE5C9E54CCCA73	
427.18			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	427.18	0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Unitil			Nature of Debt (Purpose): Utilities
Mailing Address PO BOX 2013			
City Concord	State NH	ZIP Code 03302	

Outstanding Balance Beginning This Period		Transaction ID: D14B3EB6706674783815	
115.06			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	115.06	0.00	

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

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID:</b> DF72BE3ADBBB14CB9BC7	
Amount Incurred This Period 0.00	Payment This Period 698.00	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		<b>Transaction ID:</b> D232577C9B94046BB9A9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 153.50	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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 111.80		<b>Transaction ID:</b> D51DCEF2884624EE6A6A	
Amount Incurred This Period 0.00	Payment This Period 111.80	Outstanding Balance at Close of This Period 0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	153.50
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor PMI	Nature of Debt (Purpose): Parking
Mailing Address Parking Management, Inc. 1725 DeSales Street NW	
City Washington State DC ZIP Code 20036-4406	

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

<b>B.</b> 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 59.43	<b>Transaction ID:</b> DBA9563936FE04325AD0	
Amount Incurred This Period 0.00	Payment This Period 59.43	Outstanding Balance at Close of This Period 0.00

<b>C.</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	<b>Transaction ID:</b> D27B30042D3C24348857	
Amount Incurred This Period 0.00	Payment This Period 3850.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 94 / 98  
 FOR LINE NUMBER: (check only one)  11  12

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> IAFF FIREPAC	Nature of Debt (Purpose): Rental & Bus Wrap
Mailing Address Attn: David B. Billy 1750 New York Ave, NW	
City State ZIP Code Washington DC 20006-5305	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">32233.24</div>	<b>Transaction ID: DE8437A16695047AC84E</b>
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;">32233.24</div>	

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

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">757.17</div>	<b>Transaction ID: DF06ED48AFB25453C90A</b>
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;">757.17</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>	

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

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">86.50</div>	<b>Transaction ID: D42C8F3A7325E4A5A80E</b>
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;">86.50</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">0.00</div>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">32233.24</div>
<b>2) TOTALS</b> This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;"> </div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;"> </div>
<b>4) ADD 2) and 3)</b> 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)

FOR LINE NUMBER: (check only one)

11  
 12

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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		Transaction ID: D0E366AACBEEB484CB02	
57.90			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	57.90	0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		Transaction ID: D76E8E67033CC4385B66	
10000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	10000.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		Transaction ID: D62DA2D977A734EC594A	
3850.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	3850.00	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 96 / 98
	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

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

Outstanding Balance Beginning This Period 312.07	<b>Transaction ID: DD365AF099EC8458EBE5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 312.07

<b>B.</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	<b>Transaction ID: DA4696BC628A349F7971</b>	
Amount Incurred This Period 0.00	Payment This Period 3850.00	Outstanding Balance at Close of This Period 0.00

<b>C.</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 4000.00	<b>Transaction ID: DA09D2641F3154B62833</b>	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	312.07
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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		Transaction ID: D1F57A4B00A37493E946	
4658.70			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4658.70	0.00	

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

Outstanding Balance Beginning This Period		Transaction ID: D009B107509464ACF93C	
12218.23			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	12218.23	

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

Outstanding Balance Beginning This Period		Transaction ID: D7001504DB52642CE816	
12151.74			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	12151.74	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	24369.97
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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

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

Outstanding Balance Beginning This Period 12046.59	<b>Transaction ID:</b> DEE6A4D77FA7A412F956	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12046.59

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

Outstanding Balance Beginning This Period 11927.67	<b>Transaction ID:</b> D4AB38D1C46384341B16	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11927.67

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

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> DF7FE46652AE4441E811	
Amount Incurred This Period 11823.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 11823.58

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>35797.84</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	<b>134238.68</b>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<b>134238.68</b>