

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Narragansett Bay PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="20547.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="20547.51"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="26500.00"/>	<input type="text" value="26500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="47047.51"/>	<input type="text" value="47047.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="39419.99"/>	<input type="text" value="39419.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7627.52"/>	<input type="text" value="7627.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Narragansett Bay PAC

Report Covering the Period: From: 01 / 01 / 2014 To: 03 / 31 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3000.00	3000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3000.00	3000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	23500.00	23500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	26500.00	26500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	26500.00	26500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26500.00	26500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9419.99	9419.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9419.99	9419.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	30000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	39419.99	39419.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39419.99	39419.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	26500.00	26500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26500.00	26500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	9419.99	9419.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	9419.99	9419.99

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

A. Chester Atkins
Full Name (Last, First, Middle Initial)
Mailing Address 141 Coolidge Hill
City Cambridge State MA Zip Code 02138
FEC ID number of contributing federal political committee. **C**
Name of Employer ADS Ventures, In.c Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2014
Transaction ID : C9298524
Amount of Each Receipt this Period
3000.00

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) A. Amgen Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2014 Transaction ID : C9289380
Mailing Address 601 13TH STREET, NW 12TH FLOOR		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	
Zip Code 20005		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C C00251876		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. General Dynamics Corp PAC		Date of Receipt M M / D D / Y Y Y Y Y 01 / 16 / 2014 Transaction ID : C9280739
Mailing Address 2941 FAIRVIEW PARK DR. SUITE 100		Amount of Each Receipt this Period 5000.00
City FALLS CHURCH	State VA	
Zip Code 22042		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C C00078451		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. IBEW PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2014 Transaction ID : C9302622
Mailing Address 900 Seventh St. N.W.		Amount of Each Receipt this Period 5000.00
City Washington	State DC	
Zip Code 20001		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C C00027342		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) A. Massachusetts Mutual Life PAC		Date of Receipt
Mailing Address 1295 State St		<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Springfield State MA Zip Code 01111-0001		Transaction ID : C9280740
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00118943"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="2000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) B. Oppenheimer Funds PAC		Date of Receipt
Mailing Address 1295 State St		<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Springfield State MA Zip Code 01111-0001		Transaction ID : C9280741
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00367920"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="3000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="3000.00"/>	

Full Name (Last, First, Middle Initial) C. Textron Inc. PAC		Date of Receipt
Mailing Address 40 WESTMINSTER STREET		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City PROVIDENCE State RI Zip Code 02903		Transaction ID : C9280695
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00123612"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="3500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)

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

Full Name (Last, First, Middle Initial)
A. Textron Inc. PAC

Mailing Address **40 WESTMINSTER STREET**

City **PROVIDENCE** State **RI** Zip Code **02903**

FEC ID number of contributing federal political committee. **C C00123612**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3500.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2014

Transaction ID : C9288102

Amount of Each Receipt this Period

1000.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

--

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

--

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	23500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) A. Elizabeth R. Young		Date of Disbursement MM / DD / YYYY 01 / 20 / 2014
Mailing Address 40 Waquoit Landing Rd.		Transaction ID : D533068
City East Falmouth	State MA	
Zip Code 02536	Purpose of Disbursement Treasurer Administration	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Elizabeth R. Young		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 40 Waquoit Landing Rd.		Transaction ID : D533069
City East Falmouth	State MA	
Zip Code 02536	Purpose of Disbursement Treasurer Administration	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth R. Young		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 40 Waquoit Landing Rd.		Transaction ID : D533070
City East Falmouth	State MA	
Zip Code 02536	Purpose of Disbursement Treasurer Administration	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial)

A. Hotel Viking

Mailing Address 1 Bellevue Ave.

City Newport State RI Zip Code 02840

Purpose of Disbursement
Event Expenses (Fundraising)

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2014

Transaction ID : D533080

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Kauffman Group

Mailing Address 328 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Consultant Fee (Fundraising)

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2014

Transaction ID : D533076

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Kauffman Group

Mailing Address 328 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Consultant Fee (Fundraising)

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2014

Transaction ID : D533077

Amount of Each Disbursement this Period

2000.00

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

4250.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial)

A. Kauffman Group

Mailing Address 328 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Consultant Fee (Fundraising)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D533078

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial)

A. Democratic Senatorial Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Mailing Address 120 Maryland Av. NE

Transaction ID : D533066

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

15000.00

Purpose of Disbursement
contribution of excess funds

011
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Friends of Mark Warner

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2014

Mailing Address C/O LESLIE KERMAN
818 CONNECTICUT AVE, NW, STE 1007

Transaction ID : D533071

City WASHINGTON State DC Zip Code 20006

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contributions to Candidates-Fed

011
Category/ Type

Candidate Name

Mark Warner

Office Sought: House Senate President
State: VA District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Hagan Senate Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2014

Mailing Address PO BOX 29103

Transaction ID : D533072

City GREENSBORO State NC Zip Code 27429

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contributions to Candidates-Fed

011
Category/ Type

Candidate Name

Kay Hagan

Office Sought: House Senate President
State: NC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

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

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

19500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial)

A. Jeanne Shaheen for Senate

Mailing Address PO BOX 1510

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement
Contributions to Candidates-Fed

011

Candidate Name

Jeanne Shaheen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : D533073

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Peters for Michigan

Mailing Address 600 PENNSYLVANIA AVE SE STE 210

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contributions to Candidates-Fed

011

Candidate Name

GARY PETERS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : D533079

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Udall for Colorado Inc

Mailing Address 8690 Wolff Court #200

City Westminster State CO Zip Code 80031

Purpose of Disbursement
Contributions to Candidates-Fed

011

Candidate Name

Mark Udall

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : D533074

Amount of Each Disbursement this Period

3000.00

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

8000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Narragansett Bay PAC

Full Name (Last, First, Middle Initial)

A. WALSH FOR MONTANA

Mailing Address PO BOX 1724

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Contributions to Candidates-Fed

011

Category/
Type

Candidate Name

JOHN E E WALSH

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2014

Transaction ID : D533081

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2500.00

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

30000.00