

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Carol Shea-Porter for Congress

ADDRESS (number and street)

P.O. Box 453



Check if different than previously reported. (ACC)

Rochester

NH

03866

2. FEC IDENTIFICATION NUMBER ▼

C

C00419978

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NH

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2013

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2013

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 Bill Duncan

Signature of Treasurer

Bill Duncan

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

14

Y Y Y Y

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 63

Write or Type Committee Name

Carol Shea-Porter for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	103068.88	198364.18
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	103068.88	196364.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	32558.15	164486.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	904.58	2994.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	31653.57	161492.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	140968.85	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Carol Shea-Porter for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

36515.00

60888.98

(ii) Unitemized.....

9253.65

24394.72

(iii) TOTAL of contributions from individuals ▶

45768.65

85283.70

**(b) Political Party Committees.....**

50.23

50.23

**(c) Other Political Committees (such as PACs).....**

57250.00

113030.25

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

103068.88

198364.18

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

904.58

2994.41

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

103973.46

201358.59

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 63

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32558.15	164486.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2000.00
21. OTHER DISBURSEMENTS .....	1310.00	1590.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	33868.15	168076.52

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	70863.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	103973.46
25. SUBTOTAL (add Line 23 and Line 24).....	174837.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33868.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	140968.85

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Reinier Beeuwkes**

Mailing Address 1360 Monument St

City

Concord

State

MA

Zip Code

01742-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ischemix

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : C8861031

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Pamela D Blackford**

Mailing Address 12 Sandstone Way

City

Exeter

State

NH

Zip Code

03833-4425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : C8861081

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Truda A. Bloom**

Mailing Address 18 Windsor Blvd

City

Londonderry

State

NH

Zip Code

03053-3662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2013

Transaction ID : C8848199

Amount of Each Receipt this Period

250.00

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

1750.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Eleanor Briggs**

Mailing Address 86 Kings Hwy

City

Hancock

State

NH

Zip Code

03449-5115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Photographer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2013

Transaction ID : C8860923

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Barbara B Broderick**

Mailing Address 84 Bunker Hill Ave

City

Stratham

State

NH

Zip Code

03885-2408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2013

Transaction ID : C8860791

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Burton J Cohen**

Mailing Address PO Box 208

City

New Castle

State

NH

Zip Code

03854-0208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Agent

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2013

Transaction ID : C8968974

Amount of Each Receipt this Period

250.00

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

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

850.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Helen A Connell**

**A.**

Mailing Address 11 Garden St

City

Somersworth

State

NH

Zip Code

03878-2516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
06 27 2013

**Transaction ID : C8859698**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Hiram E.T. Connell**

**B.**

Mailing Address 11 Garden St

City

Somersworth

State

NH

Zip Code

03878-2516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 27 2013

**Transaction ID : C8859582**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Lawrence C Drake Jr**

**C.**

Mailing Address 579 Sagamore Ave  
Unit 20

City

Portsmouth

State

NH

Zip Code

03801-5568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
04 19 2013

**Transaction ID : C8715424**

Amount of Each Receipt this Period

250.00

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

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

1550.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Lawrence C Drake Jr****A.**Mailing Address 579 Sagamore Ave  
Unit 20

City	State	Zip Code
Portsmouth	NH	03801-5568

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2013

**Transaction ID : C8860547**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**William A Duncan****B.**Mailing Address PO Box 760  
12 Cranfield St

City	State	Zip Code
New Castle	NH	03854-0760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2013

**Transaction ID : C8714960**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**William A Duncan****C.**Mailing Address PO Box 760  
12 Cranfield St

City	State	Zip Code
New Castle	NH	03854-0760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2013

**Transaction ID : C8859708**

Amount of Each Receipt this Period

1100.00

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

1700.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 63

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**William A Duncan**

Mailing Address PO Box 760

12 Cranfield St

City

New Castle

State

NH

Zip Code

03854-0760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 27 2013

**Transaction ID : C8971776**

Amount of Each Receipt this Period

1400.00

Full Name (Last, First, Middle Initial)

**Jan Dunn**

Mailing Address 23R Depot Rd

City

Stratham

State

NH

Zip Code

03885-2104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Toccat Consulting

Occupation

Treasurer

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
06 24 2013

**Transaction ID : C8857400**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Jan Dunn**

Mailing Address 23R Depot Rd

City

Stratham

State

NH

Zip Code

03885-2104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Toccat Consulting

Occupation

Treasurer

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
06 28 2013

**Transaction ID : C8860069**

Amount of Each Receipt this Period

750.00

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

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

2200.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

A. Gary Hirshberg

Mailing Address 38 Via Tranquilla St

City

Concord

State

NH

Zip Code

03301-3250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stonyfield Farm, Inc.Occupation  
Chairman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : C8860836

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Margaret C Hirshberg

Mailing Address 38 Via Tranquilla St

City

Concord

State

NH

Zip Code

03301-3250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Writer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : C8860903

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Steven Kagen

Mailing Address 1712 S Mason St

City

Appleton

State

WI

Zip Code

54914-5535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : C8860988

Amount of Each Receipt this Period

1000.00

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

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

6100.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Phyllis Killam-Abell

A.

Mailing Address 10 White Oak Dr

Apt 321

City

State

Zip Code

Exeter

NH

03833-5315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2013

Transaction ID : C8711486

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Phyllis Killam-Abell

Mailing Address 10 White Oak Dr

Apt 321

City

State

Zip Code

Exeter

NH

03833-5315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		24		2013

Transaction ID : C8860627

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Helen S Lauenstein

Mailing Address 4 Fieldstone Ct

City

State

Zip Code

Exeter

NH

03833-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

Transaction ID : C8860617

Amount of Each Receipt this Period

1000.00

1250.00

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

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

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

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

FOR LINE NUMBER:

PAGE 12 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Charles David London**

Mailing Address 6 Seavey Pasture Rd

City

Stratham

State

NH

Zip Code

03885-4211

FEC ID number of contributing federal political committee.

C

Name of Employer

Core Physicians

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2013

Transaction ID : C8714569

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Charles David London**

Mailing Address 6 Seavey Pasture Rd

City

Stratham

State

NH

Zip Code

03885-4211

FEC ID number of contributing federal political committee.

C

Name of Employer

Core Physicians

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2013

Transaction ID : C8857278

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Anne R Lovett**

Mailing Address PO Box 449

117 Cromwell Pt Rd

City

Holderness

State

NH

Zip Code

03245-0449

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : C8860909

Amount of Each Receipt this Period

2600.00

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

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

2900.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**A. Anne R Lovett**

Mailing Address PO Box 449

117 Cromwell Pt Rd

City

State

Zip Code

Holderness

NH

03245-0449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : C8971777

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

**B. Christopher H Lutz**

Mailing Address 75 Richdale Ave

Ste 15

City

State

Zip Code

Cambridge

MA

02140-2608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Writer

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : C8861094

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Phyllis W. Mackey**

Mailing Address 31 Finn Ave

City

State

Zip Code

Newfields

NH

03856-8230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Harbor Point Individual & Family Thera

Occupation

Marriage and Family Therapist

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

315.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 17 / 2013

Transaction ID : C8715179

Amount of Each Receipt this Period

250.00

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

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

2900.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Phyllis W. Mackey**

Mailing Address 31 Finn Ave

City

Newfields

State

NH

Zip Code

03856-8230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Harbor Point Individual & Family Thera

Occupation

Marriage and Family Therapist

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

315.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2013

Transaction ID : C8857276

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**Dave Mason**

Mailing Address PO Box 374

27 Riverview Rd

City

Jackson

State

NH

Zip Code

03846-0374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2013

Transaction ID : C8857402

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Laurie A McCray**

Mailing Address 15 Haven Rd

City

Portsmouth

State

NH

Zip Code

03801-5259

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

RN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 19 / 2013

Transaction ID : C8715417

Amount of Each Receipt this Period

100.00

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

370.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 63

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Brad Meyer**

Mailing Address PO Box 5669

City

Saint Marys

State

GA

Zip Code

31558-5669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Satilla Computer Solutions

Occupation

IT Tech

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 10 / 2013

Transaction ID : C8714210

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**Ronald B Moir**

Mailing Address 9 Hanson St

City

Somerville

State

MA

Zip Code

02143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ocean River Institute

Occupation

Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : C8861035

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Amy Mower**

Mailing Address PO Box 2004

City

Maple Falls

State

WA

Zip Code

98266-2004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : C8970971

Amount of Each Receipt this Period

250.00

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

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

950.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Janet E Prince

A.

Mailing Address PO Box 18

City

New Castle

State

NH

Zip Code

03854-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prince CommunicationsOccupation  
Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2013

Transaction ID : C8714892

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

David Sanderson

B.

Mailing Address 248 Spinney Rd

City

Portsmouth

State

NH

Zip Code

03801-4922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2013

Transaction ID : C8857246

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Constance V Seery

C.

Mailing Address 420 Wallis Rd

City

Rye

State

NH

Zip Code

03870-2243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2013

Transaction ID : C8715412

Amount of Each Receipt this Period

250.00

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

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

700.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 63

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Daniel Simon**

Mailing Address 2 Columbus Ave

Apt 37C

City

New York

State

NY

Zip Code

10023-6933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2013

Transaction ID : C8861103

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Scott W Soderquist**

Mailing Address 21 Holbrook Rd

City

Bedford

State

NH

Zip Code

03110-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rehab Equipment Associates

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 19 2013

Transaction ID : C8715425

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Kathleen N Sullivan**

Mailing Address 192 S Mammoth Rd

City

Manchester

State

NH

Zip Code

03109-4908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wadleigh, Starr & Peters PLLC

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 30 2013

Transaction ID : C8850757

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 18 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Barbara K Sweet

A.

Mailing Address PO Box 161

50 Walbach St

City

New Castle

State

NH

Zip Code

03854-0161

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Camp Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : C8968971

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

John J Tupper

B.

Mailing Address 124 Fieldstone Dr

City

Londonderry

State

NH

Zip Code

03053-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Google

Occupation

Software Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2013

Transaction ID : C8715423

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

John J Tupper

C.

Mailing Address 124 Fieldstone Dr

City

Londonderry

State

NH

Zip Code

03053-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Google

Occupation

Software Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2013

Transaction ID : C8853125

Amount of Each Receipt this Period

75.00

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

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

1150.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

John J Tupper

Mailing Address 124 Fieldstone Dr

City

Londonderry

State

NH

Zip Code

03053-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GoogleOccupation  
Software Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		14		2013

Transaction ID : C8860618

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

Judith L Wagner

Mailing Address 63 French Rd

City

Gilmanton

State

NH

Zip Code

03237-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2013

Transaction ID : C8714625

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Andrew M. Weir

Mailing Address 105 Wheel Wright Rd

City

Hampstead

State

NH

Zip Code

03841-2149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2013

Transaction ID : C8714706

Amount of Each Receipt this Period

250.00

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

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

825.00

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

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

FOR LINE NUMBER:

PAGE 20 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Ann R Welsh

Mailing Address 3 Fairchild Dr

City

Durham

State

NH

Zip Code

03824-1945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2013

Transaction ID : C8860755

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Ronna F Werner

Mailing Address 520 Washington Rd

City

Rye

State

NH

Zip Code

03870-2315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		19		2013

Transaction ID : C8715414

Amount of Each Receipt this Period

270.00

Full Name (Last, First, Middle Initial)

Katherine Wheeler

Mailing Address 27 Mill Rd

City

Durham

State

NH

Zip Code

03824-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		19		2013

Transaction ID : C8715422

Amount of Each Receipt this Period

100.00

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

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

1370.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Katherine Wheeler**

**A.**

Mailing Address 27 Mill Rd

City

Durham

State

NH

Zip Code

03824-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 20 2013

**Transaction ID : C8715322**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Katherine Wheeler**

**B.**

Mailing Address 27 Mill Rd

City

Durham

State

NH

Zip Code

03824-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 20 2013

**Transaction ID : C8847357**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Katherine Wheeler**

**C.**

Mailing Address 27 Mill Rd

City

Durham

State

NH

Zip Code

03824-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 20 2013

**Transaction ID : C8856475**

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Stephen G. Woodsum

A.

Mailing Address PO Box 449

117 Cromwell Pt. Rd.

City

State

Zip Code

Holderness

NH

03245-0449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Summit Partners

Occupation

Managing Partner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : C8860910

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Stephen G. Woodsum

B.

Mailing Address PO Box 449

117 Cromwell Pt. Rd.

City

State

Zip Code

Holderness

NH

03245-0449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Summit Partners

Occupation

Managing Partner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : C8971775

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

Mary L Heslin

C.

Mailing Address 349 Clinton St

City

State

Zip Code

Concord

NH

03301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : C8968988A

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

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

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

5250.00

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

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

FOR LINE NUMBER:

PAGE 23 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : C8968988AB

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

B. Greg Jobin-Leeds

Mailing Address PO Box 391170

City

Cambridge

State

MA

Zip Code

02139-0012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Partnership for Democracy &amp; Education

Educator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2013

Transaction ID : C8968978A

Amount of Each Receipt this Period

1000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : C8968978AB

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 24 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Maria Jobin-Leeds

Mailing Address PO Box 391170

City

Cambridge

State

MA

Zip Code

02139-0012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Partnership for Democracy &amp; Education

Occupation

Political Strategist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2013

Transaction ID : C8968977A

Amount of Each Receipt this Period

1000.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : C8968977AB

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Brad Meyer

Mailing Address PO Box 5669

City

Saint Marys

State

GA

Zip Code

31558-5669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Satilla Computer Solutions

Occupation

IT Tech

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2013

Transaction ID : C8853134A

Amount of Each Receipt this Period

50.00

\* Earmarked Contribution: See Below

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

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

1050.00



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

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

FOR LINE NUMBER:

PAGE 25 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2013

Transaction ID : C8853134AB

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Ronald B Moir

B.

Mailing Address 9 Hanson St

City

Somerville

State

MA

Zip Code

02143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Ocean River Institute

Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2013

Transaction ID : C8846443A

Amount of Each Receipt this Period

100.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue

C.

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2013

Transaction ID : C8846443AB

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

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

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

100.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 26 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

Judith L Wagner

Mailing Address 63 French Rd

City

Gilmanton

State

NH

Zip Code

03237-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		13		2013

Transaction ID : C8715396A

Amount of Each Receipt this Period

500.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2013

Transaction ID : C8715396AB

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Judith L Wagner

Mailing Address 63 French Rd

City

Gilmanton

State

NH

Zip Code

03237-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		12		2013

Transaction ID : C8860623A

Amount of Each Receipt this Period

500.00

\* Earmarked Contribution: See Below

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 27 OF 63

(check only one)

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**ActBlue**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3878.64

Date of Receipt

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : C8860623AB**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Sidney Topol**

Mailing Address 33 Commonwealth Ave

City

Boston

State

MA

Zip Code

02116-2353

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

MM / DD / YYYY  
06 / 27 / 2013

**Transaction ID : C8971019A**

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**J STREET PAC**

Mailing Address PO Box 33106

City

Washington

State

DC

Zip Code

20033-0106

FEC ID number of contributing  
federal political committee.

**C** C00441949

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : C8971019AB**

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

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

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

250.00

36515.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 63

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Democratic Congressional Campaign Committee**

Mailing Address 430 S Capitol St SE

FL 2

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

**C** C00000935

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

50.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 02 2013

**Transaction ID : C8971018**

Amount of Each Receipt this Period

50.23

\* In-Kind: Catering

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)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y 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)

Election Cycle-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).....

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

50.23

50.23

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 63

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

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**AFSCME PEOPLE**

**A.**

Mailing Address 1625 L St NW

City

Washington

State

DC

Zip Code

20036-5665

FEC ID number of contributing  
federal political committee.

**C** C00011114

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 26 / 2013

**Transaction ID : C8841230**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AFSCME PEOPLE**

**B.**

Mailing Address 1625 L St NW

City

Washington

State

DC

Zip Code

20036-5665

FEC ID number of contributing  
federal political committee.

**C** C00011114

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2013

**Transaction ID : C8853129**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**American Federation of Government Employees PAC**

**C.**

Mailing Address 80 F St NW

City

Washington

State

DC

Zip Code

20001-1528

FEC ID number of contributing  
federal political committee.

**C** C00009936

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 19 / 2013

**Transaction ID : C8715411**

Amount of Each Receipt this Period

250.00

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

5250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 63

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**A. American Federation of Teachers AFL-CIO COPE**

Mailing Address 555 New Jersey Ave NW

City

Washington

State

DC

Zip Code

20001-2029

FEC ID number of contributing  
federal political committee.

**C** C00028860

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

**06** / **14** / **2013**

**Transaction ID : C8860613**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. AMERIPAC: The Fund for a Greater America**

Mailing Address 499 S Capitol St SW  
Ste 414

City

Washington

State

DC

Zip Code

20003-4009

FEC ID number of contributing  
federal political committee.

**C** C00271338

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

**06** / **14** / **2013**

**Transaction ID : C8860614**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Bonamici for Congress**

Mailing Address 2236 SE 10th Ave

City

Portland

State

OR

Zip Code

97214

FEC ID number of contributing  
federal political committee.

**C** C00500421

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

**06** / **24** / **2013**

**Transaction ID : C8860626**

Amount of Each Receipt this Period

1000.00

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

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

11000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 63

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Defazio for Congress**

Mailing Address PO Box 1316

City

Springfield

State

OR

Zip Code

97477

FEC ID number of contributing  
federal political committee.

**C** C00215905

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

**Transaction ID : C8971021**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**EMILY'S List**

Mailing Address 1120 Connecticut Ave NW  
Ste 1100

City

Washington

State

DC

Zip Code

20036-3949

FEC ID number of contributing  
federal political committee.

**C** C00193433

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 28 / 2013

**Transaction ID : C8969501**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**Engineers Political Education Committee**

Mailing Address 1125 17th St NW

City

Washington

State

DC

Zip Code

20036-4709

FEC ID number of contributing  
federal political committee.

**C** C00029504

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2013

**Transaction ID : C8860624**

Amount of Each Receipt this Period

5000.00

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

10500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 63

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Engineers Political Education Committee**

Mailing Address 1125 17th St NW

City

Washington

State

DC

Zip Code

20036-4709

FEC ID number of contributing  
federal political committee.

**C** C00029504

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2013

**Transaction ID : C8860625**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**Give Willingly Empowering Nationally PAC**

Mailing Address 1831 Bay St SE

City

Washington

State

DC

Zip Code

20003-2510

FEC ID number of contributing  
federal political committee.

**C** C00431478

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

**Transaction ID : C8968970**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Grassroots Organizing Acting & Leading PAC**

Mailing Address PO Box 30344

City

Bethesda

State

MD

Zip Code

20824-0344

FEC ID number of contributing  
federal political committee.

**C** C00381996

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

**Transaction ID : C8970973**

Amount of Each Receipt this Period

1000.00

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

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

6500.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 63

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

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**Human Rights Campaign PAC**

Mailing Address 1640 Rhode Island Ave NW

City

Washington

State

DC

Zip Code

20036-3200

FEC ID number of contributing  
federal political committee.

**C** C00235853

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2013

**Transaction ID : C8860628**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**J STREET PAC**

Mailing Address PO Box 33106

City

Washington

State

DC

Zip Code

20033-0106

FEC ID number of contributing  
federal political committee.

**C** C00441949

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 08 / 2013

**Transaction ID : C8846509**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Jobs and Innovation Matter PAC (JIM PAC)**

Mailing Address PO Box 15320

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C** C00494112

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : C8971022**

Amount of Each Receipt this Period

1000.00

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

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

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**A. Leadership of Today and Tomorrow**

Mailing Address 700 13th St NW

Ste 600

City

Washington

State

DC

Zip Code

20005

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

C00299149

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

D D / Y Y Y Y Y

Y Y Y Y Y

**Transaction ID : C8971020**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Nancy Pelosi for Congress**

Mailing Address 700 13th St NW

Ste 600

City

Washington

State

DC

Zip Code

20005-3960

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

C00213512

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

D D / Y Y Y Y Y

Y Y Y Y Y

**Transaction ID : C8971024**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. NARAL Pro-Choice America PAC**

Mailing Address 1156 15th St NW

Ste 700

City

Washington

State

DC

Zip Code

20005-1744

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

C00079541

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

D D / Y Y Y Y Y

Y Y Y Y Y

**Transaction ID : C8970975**

Amount of Each Receipt this Period

2500.00

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

5500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 63

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**New York Jobs PAC**

Mailing Address PO Box 763

City

Deer Park

State

NY

Zip Code

11729

FEC ID number of contributing  
federal political committee.**C** C00413716

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

**Transaction ID : C8971023**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Paul Tonko for Congress**Mailing Address 911 Central Avenue  
PO Box 221

City

Albany

State

NY

Zip Code

12206

FEC ID number of contributing  
federal political committee.**C** C00450049

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

**Transaction ID : C8968973**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Schakowsky for Congress**

Mailing Address PO Box 5130

City

Evanston

State

IL

Zip Code

60204-5130

FEC ID number of contributing  
federal political committee.**C** C00327023

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

**Transaction ID : C8968976**

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 63

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**SEIU COPE**

**A.**

Mailing Address 1800 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20036-1222

FEC ID number of contributing  
federal political committee.

**C** C00004036

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : C8968972**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**Sheet Metal Workers' Int'l Assoc PAL**

**B.**

Mailing Address 1750 New York Ave NW

City

Washington

State

DC

Zip Code

20006-5305

FEC ID number of contributing  
federal political committee.

**C** C00007542

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

MM / DD / YYYY  
04 / 08 / 2013

**Transaction ID : C8713863**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**Victory Now PAC**

**C.**

Mailing Address 10537 St Paul St

City

Kensington

State

MD

Zip Code

20895

FEC ID number of contributing  
federal political committee.

**C** C00416743

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : C8970974**

Amount of Each Receipt this Period

1000.00

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

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

11000.00

57250.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 37 OF 63

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

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**A. Media Strategies and Research Inc**

Mailing Address 9900 Fairfax Blvd

City	State	Zip Code
Fairfax	VA	22030

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

904.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	10	/	2013

Transaction ID : C8715429

Amount of Each Receipt this Period

904.58

Refund

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)

Election Cycle-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)

Election Cycle-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).....

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

904.58

904.58

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2013

Amount of Each Disbursement this Period

19.75
-------

Transaction ID : D489374

**B. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

1.41
------

Transaction ID : D489375

**C. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2013

Amount of Each Disbursement this Period

1.15
------

Transaction ID : D501945

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

22.31

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 63

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2013

Amount of Each Disbursement this Period

6.99
------

Transaction ID : D504131

**B. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2013

Amount of Each Disbursement this Period

0.56
------

Transaction ID : D504132

**C. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2013

Amount of Each Disbursement this Period

1.98
------

Transaction ID : D504133

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

9.53
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# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

## **A. ActBlue Technical Services**

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 10 2013

Amount of Each Disbursement this Period

0.99

Transaction ID : D504970

Category/  
Type

## **B. ActBlue Technical Services**

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 10 2013

Amount of Each Disbursement this Period

0.04

Transaction ID : D504971

Category/  
Type

## **C. ActBlue Technical Services**

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 10 2013

Amount of Each Disbursement this Period

2.20

Transaction ID : D504972

Category/  
Type

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

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

3.23



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2013

Amount of Each Disbursement this Period

0.99
------

Transaction ID : D505444

**B. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		21		2013

Amount of Each Disbursement this Period

19.75
-------

Transaction ID : D505445

**C. ActBlue Technical Services**

Mailing Address 14 Arrow St

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2013

Amount of Each Disbursement this Period

2.38
------

Transaction ID : D505446

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

23.12

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO Box 6463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2013

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement  
Telecommunication Services

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

219.99
--------

Transaction ID : D506996

**B. AT&T**

Mailing Address PO Box 6463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2013

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement  
Telecommunication Services

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

438.55
--------

Transaction ID : D504964

**C. AT&T**

Mailing Address PO Box 6463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2013

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement  
Telecommunications Services

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

432.47
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Transaction ID : D502014

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

1091.01

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Evans & Katz LLC**Mailing Address 600 Pennsylvania Ave SE  
Ste 340

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2013

Amount of Each Disbursement this Period

813.52
--------

Transaction ID : D502768

**B. Evans & Katz LLC**Mailing Address 600 Pennsylvania Ave SE  
Ste 340

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

663.22
--------

Transaction ID : D488831

**C. Evans & Katz LLC**Mailing Address 600 Pennsylvania Ave SE  
Ste 340

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2013

Amount of Each Disbursement this Period

873.82
--------

Transaction ID : D504958

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

2350.56
---------

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 63

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

## **A. First Data Corporation**

Mailing Address 6200 S Quebec St

City State Zip Code  
 Greenwood Village CO 80111-4729

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 03 / 2013

Amount of Each Disbursement this Period

304.47

Transaction ID : D501999

## **B. First Data Corporation**

Mailing Address 6200 S Quebec St

City State Zip Code  
 Greenwood Village CO 80111-4729

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 04 / 2013

Amount of Each Disbursement this Period

75.15

Transaction ID : D502001

## **c. First Data Corporation**

Mailing Address 6200 S Quebec St

City State Zip Code  
 Greenwood Village CO 80111-4729

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 04 / 2013

Amount of Each Disbursement this Period

62.80

Transaction ID : D502002

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

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

442.42

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 6200 S Quebec St

City	State	Zip Code
Greenwood Village	CO	80111-4729

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2013

Amount of Each Disbursement this Period

573.06
--------

Transaction ID : D502003

**B. First Data Corporation**

Mailing Address 6200 S Quebec St

City	State	Zip Code
Greenwood Village	CO	80111-4729

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2013

Amount of Each Disbursement this Period

483.12
--------

Transaction ID : D504160

**c. First Data Corporation**

Mailing Address 6200 S Quebec St

City	State	Zip Code
Greenwood Village	CO	80111-4729

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2013

Amount of Each Disbursement this Period

64.94
-------

Transaction ID : D504162

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

573.06

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 6200 S Quebec St

City	State	Zip Code
Greenwood Village	CO	80111-4729

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 03 / 2013

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : D504163

**B. First Data Corporation**

Mailing Address 6200 S Quebec St

City	State	Zip Code
Greenwood Village	CO	80111-4729

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 03 / 2013

Amount of Each Disbursement this Period

22.80
-------

Transaction ID : D504165

**c. GoDaddy.com**Mailing Address 14455 N Hayden Rd  
Ste 219

City	State	Zip Code
Scottsdale	AZ	85260-6993

Purpose of Disbursement  
Website Domain Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 18 / 2013

Amount of Each Disbursement this Period

644.80
--------

Transaction ID : D502013

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

692.60

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Kathleen Conroy**

Mailing Address 158 Northwood Rd

City	State	Zip Code
Strafford	NH	03884

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		12		2013

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : D501987

**B. Kathleen Conroy**

Full Name (Last, First, Middle Initial)

Mailing Address 158 Northwood Rd

City	State	Zip Code
Strafford	NH	03884

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2013

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : D502772

**C. Kathleen Conroy**

Full Name (Last, First, Middle Initial)

Mailing Address 158 Northwood Rd

City	State	Zip Code
Strafford	NH	03884

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2013

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : D507004

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

1050.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Liberty Concepts**Mailing Address 119 Braintree St  
Ste 211

City Allston State MA Zip Code 02134-1641

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2013

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : D504957

**B. Liberty Concepts**Mailing Address 119 Braintree St  
Ste 211

City Allston State MA Zip Code 02134-1641

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2013

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : D502767

**c. Liberty Concepts**Mailing Address 119 Braintree St  
Ste 211

City Allston State MA Zip Code 02134-1641

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : D488828

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

600.00
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 63

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Member Dues

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2013

Amount of Each Disbursement this Period

621.63
--------

Transaction ID : D502008

**B. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Food/Beverages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2013

Amount of Each Disbursement this Period

160.00
--------

Transaction ID : D502010

**C. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Food/Beverages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2013

Amount of Each Disbursement this Period

451.63
--------

Transaction ID : D504177

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

621.63



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 63

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. New Hampshire Department of Revenue Administration**

Mailing Address PO Box 637

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2013

Amount of Each Disbursement this Period

887.00
--------

Transaction ID : D504969

**B. New York Times**

Mailing Address 620 8th Ave

City	State	Zip Code
New York	NY	10018-1618

Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2013

Amount of Each Disbursement this Period

64.40
-------

Transaction ID : D504173

**C. New York Times**

Mailing Address 620 8th Ave

City	State	Zip Code
New York	NY	10018-1618

Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2013

Amount of Each Disbursement this Period

64.40
-------

Transaction ID : D504910

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

1015.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. New York Times**

Mailing Address 620 8th Ave

City	State	Zip Code
New York	NY	10018-1618

Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2013

Amount of Each Disbursement this Period

64.40
-------

Transaction ID : D502004

**B. NGP VAN, Inc.**Mailing Address 1101 15th St NW  
Ste 500

City	State	Zip Code
Washington	DC	20005-5006

Purpose of Disbursement  
Software Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2013

Amount of Each Disbursement this Period

2700.00
---------

Transaction ID : D504956

**c. Paper Trails**

Mailing Address 12 Federal St

City	State	Zip Code
Brunswick	ME	04011-1509

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2013

Amount of Each Disbursement this Period

45.00
-------

Transaction ID : D504169

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

2809.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 63

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Carol Shea-Porter for Congress**

Full Name (Last, First, Middle Initial)

**A. Puritan Backroom**

Mailing Address 245 Hooksett Rd

City	State	Zip Code
Manchester	NH	03104-2641

Purpose of Disbursement  
Food/Beverages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2013

Amount of Each Disbursement this Period

2000.00	58.00
---------	-------

Transaction ID : D504911

**B. Shirley Sauvageau**

Mailing Address 149 Stage Rd

City	State	Zip Code
Nottingham	NH	03290-6401

Purpose of Disbursement  
Data Support Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2013

Amount of Each Disbursement this Period

2000.00	1000.00
---------	---------

Transaction ID : D504182

**c. Shirley Sauvageau**

Mailing Address 149 Stage Rd

City	State	Zip Code
Nottingham	NH	03290-6401

Purpose of Disbursement  
Data Support Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2013

Amount of Each Disbursement this Period

2000.00	1000.00
---------	---------

Transaction ID : D502764

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

2058.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Shirley Sauvageau**

Mailing Address 149 Stage Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

City	State	Zip Code
Nottingham	NH	03290-6401

Purpose of Disbursement  
Data Support Services

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : D488833

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 500 Staples Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2013

City	State	Zip Code
Framingham	MA	01702

Purpose of Disbursement  
Office Supplies

Amount of Each Disbursement this Period

137.94
--------

Transaction ID : D504967

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Staples**

Mailing Address 500 Staples Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2013

City	State	Zip Code
Framingham	MA	01702

Purpose of Disbursement  
Office Supplies

Amount of Each Disbursement this Period

37.99
-------

Transaction ID : D506999

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

2175.93

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Sustainable Impact LLC**

Mailing Address 4601 Victoria Blvd

City	State	Zip Code
Hampton	VA	23669

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2013

Amount of Each Disbursement this Period

248.99
--------

Transaction ID : D504954

**B. Sustainable Impact LLC**

Mailing Address 4601 Victoria Blvd

City	State	Zip Code
Hampton	VA	23669

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2013

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : D504955

**c. Sustainable Impact LLC**

Mailing Address 4601 Victoria Blvd

City	State	Zip Code
Hampton	VA	23669

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

6428.57
---------

Transaction ID : D488829

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

11677.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Sustainable Impact LLC**

Mailing Address 4601 Victoria Blvd

City	State	Zip Code
Hampton	VA	23669

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

1109.30
---------

Transaction ID : D488830

**B. TD Banknorth**

Mailing Address 1 Old Dover Rd

City	State	Zip Code
Rochester	NH	03867-3460

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2013

Amount of Each Disbursement this Period

21.20
-------

Transaction ID : D504951

**c. TD Banknorth**

Mailing Address 1 Old Dover Rd

City	State	Zip Code
Rochester	NH	03867-3460

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2013

Amount of Each Disbursement this Period

88.16
-------

Transaction ID : D504952

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

1218.66



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. TD Banknorth**

Mailing Address 1 Old Dover Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2013

City	State	Zip Code
Rochester	NH	03867-3460

Amount of Each Disbursement this Period

31.28
-------

Purpose of Disbursement  
Bank FeesCategory/  
Type

Transaction ID : D504953

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. TD Banknorth**

Mailing Address 1 Old Dover Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		28		2013

City	State	Zip Code
Rochester	NH	03867-3460

Amount of Each Disbursement this Period

15.00
-------

Purpose of Disbursement  
Bank FeesCategory/  
Type

Transaction ID : D507002

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. United States Postal Service**

Mailing Address 475 L'Enfant Plz SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		28		2013

City	State	Zip Code
Washington	DC	20260-0001

Amount of Each Disbursement this Period

3.71
------

Purpose of Disbursement  
PostageCategory/  
Type

Transaction ID : D507003

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

49.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 19769

City	State	Zip Code
Irvine	CA	92623-9769

Purpose of Disbursement  
Telecommunication Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2013

Amount of Each Disbursement this Period

171.71
--------

Transaction ID : D507001

**B. Verizon Wireless**

Mailing Address PO Box 19769

City	State	Zip Code
Irvine	CA	92623-9769

Purpose of Disbursement  
Telecommunications Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2013

Amount of Each Disbursement this Period

171.71
--------

Transaction ID : D504181

**C. Verizon Wireless**

Mailing Address PO Box 19769

City	State	Zip Code
Irvine	CA	92623-9769

Purpose of Disbursement  
Telecommunications Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2013

Amount of Each Disbursement this Period

173.67
--------

Transaction ID : D502019

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

517.09

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Naomi Andrews**

Mailing Address 20 Elliot Park

City	State	Zip Code
Dover	NH	03820-4265

Purpose of Disbursement  
Reimbs - Lodging, Travel, Food/Beverages

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

801.37
--------

Transaction ID : D488822

**B. Sheraton Hotels**

Mailing Address 1111 Westchester Ave

City	State	Zip Code
White Plains	NY	10604-3525

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

257.02
--------

Transaction ID : D488823

[MEMO ITEM]

**c. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City	State	Zip Code
Phoenix	AZ	85034-3802

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2013

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : D488826

[MEMO ITEM]

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

801.37
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 63

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Bill Me Later**

Mailing Address PO Box 2394

City	State	Zip Code
Omaha	NE	68103

Purpose of Disbursement  
Credit Card Payment - See Below

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2013

Amount of Each Disbursement this Period

406.50
--------

Transaction ID : D502018

**B. United States Postal Service**

Mailing Address 475 L'Enfant Plz SW

City	State	Zip Code
Washington	DC	20260-0001

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2013

Amount of Each Disbursement this Period

65.95
-------

Transaction ID : D504159

[MEMO ITEM]

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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

406.50
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30512.65
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Carol Shea-Porter for Congress

Full Name (Last, First, Middle Initial)

**A. Paula A Francese**

Mailing Address 181 High St

City	State	Zip Code
Exeter	NH	03833-3125

Purpose of Disbursement  
Replace check voided on 6/7/13

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2013

Amount of Each Disbursement this Period

775.00
--------

Transaction ID : D504960

Refund

**B. Paula A Francese**

Mailing Address 181 High St

City	State	Zip Code
Exeter	NH	03833-3125

Purpose of Disbursement  
Voiding check from 10/1/12

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2013

Amount of Each Disbursement this Period

-775.00
---------

Transaction ID : D519933

**C. Judith L Wagner**

Mailing Address 63 French Rd

City	State	Zip Code
Gilmanon	NH	03237-5502

Purpose of Disbursement  
Replace check voided on 6/7/13

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2013

Amount of Each Disbursement this Period

150.00
--------

Transaction ID : D504961

Refund

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

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

150.00
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