



SENATOR RUSS FEINGOLD, HONORARY CHAIR

RECEIVED
FEC MAIL
OPERATIONS CENTER

2005 JAN -4 A 8:20

P.O. BOX 628008
MIDDLETON, WI 53562
PHONE: 608-831-1308
FAX: 608-831-1348
RUSS@PROGRESSIVEPATRIOTSFUND.COM

December 27, 2005

Mr. Michael Hartsock
Reports Analysis Division
Federal Election Commission (FEC)
999 E Street NW
Washington, DC 20463

RE: November Monthly Report
FEC Identification Number: C 00409136

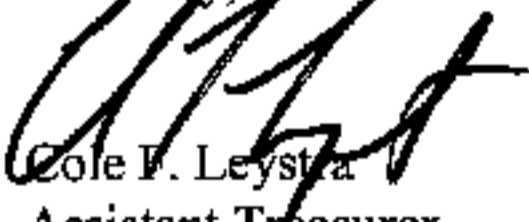
Dear Mr. Hartsock:

On December 15, 2005, the Progressive Patriots Fund received a request for additional information in response to the November 2005 Monthly Report. The letter requested clarification of a few expenditures disclosed in Schedule B as Line 21(b). I would like to assure you that all expenditures disclosed as Line 21(b) were in support of the committee itself and did not in any way serve as contributions to federal or non-federal candidates.

On December 27, 2005, the Progressive Patriots Fund submitted an amendment to the November Monthly Report with memo text on page 64 clarifying that all expenditures reported as Line 21(b) were not contributions to other candidates. I would also like to assure you that appropriate steps have been taken to ensure that all future expenditures will be clearly identified as Federal Operating Expenditures or as contributions to candidates.

This letter is meant to serve as verification that, per our discussion on December 20, the amendment filed December 27 is an adequate response to the request for additional information. If this is not the case or if you have any questions, please contact me at (608) 831-1308.

Sincerely,


Cole V. Leysta
Assistant Treasurer
Progressive Patriots Fund

WWW.PROGRESSIVEPATRIOTSFUND.COM

AUTHORIZED AND PAID FOR BY THE PROGRESSIVE PATRIOTS FUND, DANIEL D. HANNULA, SUPERIOR, WI, TREASURER.



**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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OPERATIONS CENTER

2005 JAN -4 A 8:24
Office Use Only

1. NAME OF COMMITTEE (in full) **SENIOR CITIZEN FUND** TYPE OR PRINT Example: If typing, type over the lines. **12FE4M5**

ADDRESS (number and street) **40 SHATTUCK RD**
 Check if different than previously reported. (ACC) **SUITE 200**
ANDOVER MA 01810

2. FEC IDENTIFICATION NUMBER **EW 20-030624** CITY STATE ZIP CODE
C00393223

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

| | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

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

| | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

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

| | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period **01 01 2005** through **03 31 2005**

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 **Elizabeth Davis**

Signature of Treasurer *Elizabeth Davis* Date _____

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period: From: 01/01/2005 To: 03/31/2005

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <u>2005</u> | | 7,573.69 |
| (b) Cash on Hand at Beginning of Reporting Period | 7,573.69 | |
| (c) Total Receipts (from Line 19) | 1,030.00 | 1,030.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 8,603.69 | 8,603.69 |
| 7. Total Disbursements (from Line 31) | 0 | 0 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 8,603.69 | 8,603.69 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0 | |

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

For further information contact:

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

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

26058941855

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From: 01 01 2005 To: 03 31 2005

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 1,030.- | |
| (ii) Unitemized | | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)) | 1,030.00 | 1,030.00 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 1,030.00 | 1,030.00 |
| 12. Transfers From Affiliated/Other Party Committees | | |
| 13. All Loans Received | | |
| 14. Loan Repayments Received | | |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | | |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | | |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | | |
| (b) Levin Funds (from Schedule H5) | | |
| (c) Total Transfers (add 18(a) and 18(b)) | | |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 1,030.00 | 1,030.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | | |

20038941840

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

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

| | | | | |
|--------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sentillion Inc. Fund

A. Full Name (Last, First, Middle Initial)
Copeland, Maggie

Mailing Address
314 Interstate Parkway

City
Bradford State
PA Zip Code
14701

FEC ID number of contributing federal political committee.
C

Name of Employer
Sentillion Occupation
Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 08 / 2005

Amount of Each Receipt this Period
600.00

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

Mailing Address
201 Carlisle Road

City
Bedford State
MA Zip Code
01730

FEC ID number of contributing federal political committee.
C

Name of Employer
Sentillion Occupation
development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 08 / 2005

Amount of Each Receipt this Period
240.00

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

Mailing Address
39 Bartlett Ave

City
Arlington State
MA Zip Code
02476

FEC ID number of contributing federal political committee.
C

Name of Employer
Sentillion Occupation
manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 08 / 2005

Amount of Each Receipt this Period
~~240.00~~
150.00

SUBTOTAL of Receipts This Page (optional) ▶ *990.00*

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

26038941821

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sentillions Inc. Fund

A. Full Name (Last, First, Middle Initial)
Compbell, Jaws

Mailing Address
11 Casey Drive

City *Milford* State *MA* Zip Code *03055*

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

Name of Employer *Sentillion* Occupation *development*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 08 / 2005

Amount of Each Receipt this Period
40.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) *40.*

TOTAL This Period (last page this line number only) *1030.00*

126038941842

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

25038941825

| | |
|--|-------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input checked="" type="checkbox"/> USPS First Class Mail | Postmarked |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input checked="" type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| Next Business Day Delivery <input type="checkbox"/> | |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

EA
1/4/06

PREPARER
DATE PREPARED