



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NEMED PAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |         |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 8 |  | 4305.35 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |         |
| 2   | 0                       | 0                                 | 8 |   |   |   |   |   |  |         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 6628.85                 |                                   |   |   |   |   |   |   |  |         |
| (c) Total Receipts (from Line 19) .....   | 4735.00                 | 8335.00                           |   |   |   |   |   |   |  |         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 11363.85                | 12640.35                          |   |   |   |   |   |   |  |         |
| 7. Total Disbursements (from Line 31) .....   | 5000.00                 | 6276.50                           |   |   |   |   |   |   |  |         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 6363.85                 | 6363.85                           |   |   |   |   |   |   |  |         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |         |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |         |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
NEMED PAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 4550.00                       | 7025.00                           |
| (i) Itemized (use Schedule A) .....  | 185.00                        | 310.00                            |
| (ii) Unitemized .....  | 4735.00                       | 7335.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 0.00                          | 1000.00                           |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 4735.00                       | 8335.00                           |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 0.00                          | 0.00                              |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 4735.00                       | 8335.00                           |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 4735.00                       | 8335.00                           |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal<br>Activity (from Schedule H4)  |                                       |   |
| (i) Federal Share.....   | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....  | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating<br>Expenditures.....   | 0.00                                  | 26.50                                     |
| (c) Total Operating Expenditures<br>(add 21(a)(i), (a)(ii) and (b)).....                             | 0.00                                  | 26.50                                     |
| 22. Transfers to Affiliated/Other Party<br>Committees.....   | 0.00                                  | 0.00                                      |
| 23. Contributions to<br>Federal Candidates/Committees.....<br>and Other Political Committees.....    | 5000.00                               | 6250.00                                   |
| 24. Independent Expenditure<br>(use Schedule E) .....  | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party<br>Committees (2 U.S.C. 441a(d))<br>(use Schedule F)..... | 0.00                                  | 0.00                                      |
| 26. Loan Repayments Made.....  | 0.00                                  | 0.00                                      |
| 27. Loans Made.....  | 0.00                                  | 0.00                                      |
| 28. Refunds of Contributions To:   |                                       |   |
| (a) Individuals/Persons Other<br>Than Political Committees .....                                     | 0.00                                  | 0.00                                      |
| (b) Political Party Committees   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees<br>(such as PACs) .....   | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds<br>(add Lines 28(a), (b), and (c)) .....                              | 0.00                                  | 0.00                                      |
| 29. Other Disbursements.....   | 0.00                                  | 0.00                                      |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared Federal Election Activity<br>(from Schedule H6)   |                                       |   |
| (i) Federal Share .....  | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....   | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely<br>With Federal Funds .....                              | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add<br>Lines 30(a)(i), 30(a)(ii) and 30(b))....                 | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22,<br>23, 24, 25, 26, 27, 28(d), 29 and 30(c))..          | 5000.00                               | 6276.50                                   |
| 32. Total Federal Disbursements<br>(subtract Line 21(a)(ii) and Line 30(a)(ii)<br>from Line 31)..... | 5000.00                               | 6276.50                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3 .....         | 4735.00                       | 8335.00                           |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 4735.00                       | 8335.00                           |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 26.50                             |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 0.00                          | 26.50                             |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

|   |                              |
|---|------------------------------|
| FOR LINE NUMBER:                        | PAGE 6 / 12                  |
| (check only one)                        |                              |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
| <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
| <input type="checkbox"/>                | <input type="checkbox"/> 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)  
NEMED PAC

|   |  |                                      |   |
|---|--|--------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>William Bonanno |                                      | Date of Receipt   |
|   | Mailing Address 835 School Street                          |                                      | <input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2008"/> |
|   | City   | State                                | Zip Code  |
|   | Webster  | MA                                   | 01570   |
|   | FEC ID number of contributing federal political committee. |                                      | <input type="text" value="C"/>  |
| Name of Employer<br>Sports Auction for Charity  |  | Occupation<br>Owner/President        | Transaction ID: SA11AI.4397   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼             | Amount of Each Receipt this Period<br><input type="text" value="1440.00"/>                            |
|   |  | <input type="text" value="1440.00"/> | Sports Auction Sales  |

|   |  |                                      |   |
|---|--|--------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>William Bonanno |                                      | Date of Receipt   |
|   | Mailing Address 835 School Street                          |                                      | <input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2008"/> |
|   | City   | State                                | Zip Code  |
|   | Webster  | MA                                   | 01570   |
|   | FEC ID number of contributing federal political committee. |                                      | <input type="text" value="C"/>  |
| Name of Employer<br>Sports Auction for Charity  |  | Occupation<br>Owner/President        | Transaction ID: SA11AI.4406   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼             | Amount of Each Receipt this Period<br><input type="text" value="30.00"/>                              |
|   |  | <input type="text" value="1470.00"/> | NEMED PAC Contribution  |

|   |  |                                     |   |
|---|--|-------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Christopher G. Ferris |                                     | Date of Receipt   |
|   | Mailing Address 137 Peterson Path                                |                                     | <input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2008"/> |
|   | City   | State                               | Zip Code  |
|   | Marshfield   | MA                                  | 06516   |
|   | FEC ID number of contributing federal political committee.       |                                     | <input type="text" value="C"/>  |
| Name of Employer<br>Clinical One  |  | Occupation<br>Administrative        | Transaction ID: SA11AI.4399   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
|   |  | <input type="text" value="250.00"/> | NEMED PAC Contribution  |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="1720.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                 |

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

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

FOR LINE NUMBER: PAGE 7 / 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NEMED PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael McDonald

Mailing Address 79 Woodworth Lane

City State Zip Code  
Scituate MA 02066

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

Name of Employer Occupation  
Clinical One PRESIDENT & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2008

**Transaction ID:** SA11AI.4405

Amount of Each Receipt this Period  
220.00

NEMED PAC Contribution

**B.** Full Name (Last, First, Middle Initial)  
CC Contributions 2008 NEMED Silent Auction

Mailing Address 515 Kempton Street

City State Zip Code  
New Bedford MA 02743

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

Name of Employer Occupation  
NEMED Fund Raiser

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2610.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2008

**Transaction ID:** SA11AI.4394

Amount of Each Receipt this Period  
2610.00

Fund Raiser Contributions

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2830.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 4550.00 |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEMED PAC

|    |   |  |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial)<br>THOMAS H ALLEN   | Transaction ID: SB23.4415<br>Date of Disbursement<br>07 / 24 / 2008  |
|    | Mailing Address 550 FOREST AVENUE   | Amount of Each Disbursement this Period<br>750.00  |
|    | City PORTLAND State ME Zip Code 04101   |  |
|    | Purpose of Disbursement Campaign Contribution   | Category/Type  |
|    | Candidate Name THOMAS H ALLEN   |  |
|    | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: ME District: 00 | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |   |  |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial)<br>CAPUANO FOR CONGRESS COMMITTEE   | Transaction ID: SB23.4477<br>Date of Disbursement<br>09 / 19 / 2008  |
|    | Mailing Address PO BOX 440305   | Amount of Each Disbursement this Period<br>250.00  |
|    | City SOMERVILLE State MA Zip Code 02144   |  |
|    | Purpose of Disbursement Campaign Contribution   | Category/Type  |
|    | Candidate Name CAPUANO FOR CONGRESS COMMITTEE   |  |
|    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MA District: 08 | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |   |  |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial)<br>SUSAN M COLLINS  | Transaction ID: SB23.4418<br>Date of Disbursement<br>07 / 24 / 2008  |
|    | Mailing Address 223 NOWELL ROAD   | Amount of Each Disbursement this Period<br>1000.00   |
|    | City BANGOR State ME Zip Code 04401   |  |
|    | Purpose of Disbursement Campaign Contribution   | Category/Type  |
|    | Candidate Name SUSAN M COLLINS  |  |
|    | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: ME District: 00 | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEMED PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>JOSEPH D COURTNEY   | Transaction ID: SB23.4425<br>Date of Disbursement<br>08 / 15 / 2008 |
|    | Mailing Address PO BOX 1372  | Amount of Each Disbursement this Period<br>250.00                   |
|    | City VERNON State CT Zip Code 06066  |   |
|    | Purpose of Disbursement Campaign Contribution<br>Candidate Name JOSEPH D COURTNEY<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CT District: 02 | Category/Type   |
|    | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |   |
| B. | Full Name (Last, First, Middle Initial)<br>JIM P MCGOVERN  | Transaction ID: SB23.4431<br>Date of Disbursement<br>08 / 26 / 2008 |
|    | Mailing Address 393 BURNCOAT ST  | Amount of Each Disbursement this Period<br>250.00                   |
|    | City Worcester State MA Zip Code 01606   |   |
|    | Purpose of Disbursement Campaign Contribution<br>Candidate Name JIM P MCGOVERN<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MA District: 03    | Category/Type   |
|    | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |   |
| C. | Full Name (Last, First, Middle Initial)<br>MICHAUD, MICHAEL H  | Transaction ID: SB23.4412<br>Date of Disbursement<br>07 / 23 / 2008 |
|    | Mailing Address 213 Lisbon Street  | Amount of Each Disbursement this Period<br>250.00                   |
|    | City Lewiston State ME Zip Code 04240  |   |
|    | Purpose of Disbursement Campaign Contribution<br>Candidate Name MICHAEL H MICHAUD<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: ME District: 02 | Category/Type   |
|    | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |   |

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

750.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

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

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NAME OF COMMITTEE (In Full)  
NEMED PAC

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>RICHARD E MR. NEAL</p> <p>Mailing Address 36 ATWATER TERRACE</p> <p>City SPRINGFIELD State MA Zip Code 01107</p> <p>Purpose of Disbursement<br/>Campaign Contribution</p> <p>Candidate Name<br/>RICHARD E MR. NEAL</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: MA District: 02</p>    | <p><b>Transaction ID:</b> SB23.4434</p> <p>Date of Disbursement<br/>08 / 26 / 2008</p> <p>Amount of Each Disbursement this Period<br/>500.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>JOHN WALTER OLVER</p> <p>Mailing Address 1333 WEST STREET</p> <p>City AMHERST State MA Zip Code 01002</p> <p>Purpose of Disbursement<br/>Campaign Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: MA District: 01</p>                                  | <p><b>Transaction ID:</b> SB23.4439</p> <p>Date of Disbursement<br/>09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period<br/>250.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>CHRISTOPHER SHAYS</p> <p>Mailing Address 98 East Avenue Rear Building</p> <p>City Norwalk State CT Zip Code 06851</p> <p>Purpose of Disbursement<br/>Campain Contribution</p> <p>Candidate Name<br/>CHRISTOPHER SHAYS</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: CT District: 04</p> | <p><b>Transaction ID:</b> SB23.4421</p> <p>Date of Disbursement<br/>07 / 28 / 2008</p> <p>Amount of Each Disbursement this Period<br/>250.00</p> |

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

1000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEMED PAC

A.

Full Name (Last, First, Middle Initial)  
JOHN F TIERNEY

Transaction ID: SB23.4461  
Date of Disbursement

Mailing Address 21 SETTLER'S WAY

/   /

City State Zip Code  
SALEM MA 01970

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Contribution

Category/  
Type

Candidate Name  
TIERNEY FOR CONGRESS COMMITTEE

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MA District: 05

B.

Full Name (Last, First, Middle Initial)  
NICOLA TSONGAS

Transaction ID: SB23.4464  
Date of Disbursement

Mailing Address 52 LAWRENCE DRIVE

/   /

City State Zip Code  
LOWELL MA 01854

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Contribution

Category/  
Type

Candidate Name  
NICOLA TSONGAS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MA District: 05

C.

Full Name (Last, First, Middle Initial)  
George VOINOVICH FOR SENATE COMMITTEE

Transaction ID: SB23.4459  
Date of Disbursement

Mailing Address 865 MACON ALLEY

/   /

City State Zip Code  
COLUMBUS OH 43206

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: OH District: 00

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 12

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

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NAME OF COMMITTEE (In Full)  
NEMED PAC

|    |   |  |                   |   |  |
|----|---|--|-------------------|---|--|
| A. | Full Name (Last, First, Middle Initial)<br>PETER WELCH  |  |                   | Transaction ID: SB23.4428                         |  |
|    | Mailing Address 346 TOWN FARM HILL ROAD   |  |                   | Date of Disbursement<br>08 / 26 / 2008            |  |
|    | City<br>HARTLAND  | State<br>VT  | Zip Code<br>05048 | Amount of Each Disbursement this Period<br>250.00 |  |
|    | Purpose of Disbursement<br>Campaign Contribution  |  |                   | Category/<br>Type                                 |  |
|    | Candidate Name<br>PETER WELCH   |  |                   |   |  |
|    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |   |  |
|    | State: VT   |  | District: 00      |   |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 250.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 5000.00 |