

REPORT OF RECEIPTS AND DISBURSEMENTS
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 70

| | | |
|---|--|--|
| 1. NAME OF COMMITTEE (in full) Kucinich for President 2008 | | 2. IDENTIFICATION NUMBER C00430975 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 550 E. Walnut St | | |
| CITY, STATE, and ZIP CODE Columbus OH 43215 | | 3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |

4. TYPE OF REPORT (Check here if this is a Termination Report.)

| | | | | | | | | | | | | | |
|--|--|--------------------------------------|----------------------------------|-------------------------------------|--|----------------------------------|--------------------------------------|-----------------------------------|------------------------------------|--------------------------------------|---------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report | Monthly Report Due On: <table style="width:100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input checked="" type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table> <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____ <input type="checkbox"/> Thirtieth day report following the General Election on _____ on _____ | <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 | <input checked="" type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 | <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 | <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 | | | | | | | | | | | |
| <input checked="" type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 | | | | | | | | | | | |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 | | | | | | | | | | | |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 | | | | | | | | | | | |

IS THIS REPORT AN AMENDMENT YES NO

| | | |
|---------------------------|---------------------------|------------------------------|
| 5. COVERING PERIOD | FROM 02/01/2008 | THROUGH 02/29/2008 |
|---------------------------|---------------------------|------------------------------|

| SUMMARY | | |
|--|------------|--|
| 6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD | 99130.82 | |
| 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) | 51217.20 | |
| 8. SUBTOTAL (Lines 6 and 7) | 150348.02 | |
| 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) | 114325.69 | |
| 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) | 36022.33 | |
| 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 0.00 | |
| 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 791180.58 | |
| 13. EXPENDITURES SUBJECT TO LIMITATION | 0.00 | |
| NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES | | |
| 14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) | 4422125.96 | |
| 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) | 4392137.41 | |

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 Gary Kucinich | Date 01/31/2011 |
| Signature of Treasurer | |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

| | | |
|---|---|--|
| For further information contact: | Federal Election Commission 999 E Street, N.W. Washington, DC 20463 | Toll Free 800-424-9530 Local 202-694-1100 |
| | | FEC FORM 3P (01/2001) |

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

| Name of committee (in full) Kucinich for President 2008 | Report Covering the Period | |
|--|---------------------------------------|--|
| | From: 02/01/2008 | To: 02/29/2008 |
| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) | 34663.92 | 34663.92 |
| 17. CONTRIBUTIONS (other than loans) FROM : | | |
| (a) Individuals/Persons Other Than Political Committees | 15494.00 | 4418625.46 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees | 0.00 | 13950.00 |
| (d) The Candidate | 0.00 | 25.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) | 15494.00 | 4432600.46 |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOANS RECEIVED: | | |
| (a) Loans Received From or Guaranteed by Candidate | 0.00 | 0.00 |
| (b) Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOANS (Add 19(a) and 19(b)) | 0.00 | 0.00 |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) : | | |
| (a) Operating | 1049.15 | 12119.93 |
| (b) Fundraising | 0.00 | 0.00 |
| (c) Legal and Accounting | 0.00 | 0.00 |
| (d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) | 1049.15 | 12119.93 |
| 21. OTHER RECEIPTS (Dividend, Interest, etc.) | 10.13 | 396.65 |
| 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) | 51217.20 | 4479780.96 |
| II. DISBURSEMENTS | | |
| 23. OPERATING EXPENDITURES | 107270.69 | 4404257.34 |
| 24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 25. FUNDRAISING DISBURSEMENTS | 0.00 | 0.00 |
| 26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS | 0.00 | 0.00 |
| 27. LOAN REPAYMENTS MADE : | | |
| (a) Repayment of Loans made or Guaranteed by Candidate | 0.00 | 0.00 |
| (b) Other Repayments | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) | 0.00 | 0.00 |
| 28. REFUNDS OF CONTRIBUTIONS TO : | | |
| (a) Individuals/Persons Other Than Political Committees | 7055.00 | 10464.50 |
| (b) Political Party Committees | 0.00 | 10.00 |
| (c) Other Political Committees | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) | 7055.00 | 10474.50 |
| 29. OTHER DISBURSEMENTS | 0.00 | 29026.79 |
| 30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) | 114325.69 | 4443758.63 |
| III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.) | | |
| 31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) | 0.00 | |

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 70
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

Kucinich for President 2008

ADDRESS (number and street)

550 E. Walnut St

CITY, STATE, and ZIP CODE

Columbus

OH

43215

2. IDENTIFICATION NUMBER

C00430975

ALLOCATION BY STATE

| STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE | STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE |
|----------------------|------------------------|--------------------------|----------------|------------------------|--------------------------|
| Alabama | 0.00 | 0.00 | Nebraska | 0.00 | 0.00 |
| Alaska | 0.00 | 0.00 | Nevada | 0.00 | 0.00 |
| Arizona | 0.00 | 0.00 | New Hampshire | 0.00 | 0.00 |
| Arkansas | 0.00 | 0.00 | New Jersey | 0.00 | 0.00 |
| California | 0.00 | 0.00 | New Mexico | 0.00 | 0.00 |
| Colorado | 0.00 | 0.00 | New York | 0.00 | 0.00 |
| Connecticut | 0.00 | 0.00 | North Carolina | 0.00 | 0.00 |
| Delaware | 0.00 | 0.00 | North Dakota | 0.00 | 0.00 |
| District of Columbia | 0.00 | 0.00 | Ohio | 0.00 | 0.00 |
| Florida | 0.00 | 0.00 | Oklahoma | 0.00 | 0.00 |
| Georgia | 0.00 | 0.00 | Oregon | 0.00 | 0.00 |
| Hawaii | 0.00 | 0.00 | Pennsylvania | 0.00 | 0.00 |
| Idaho | 0.00 | 0.00 | Rhode Island | 0.00 | 0.00 |
| Illinois | 0.00 | 0.00 | South Carolina | 0.00 | 0.00 |
| Indiana | 0.00 | 0.00 | South Dakota | 0.00 | 0.00 |
| Iowa | 0.00 | 0.00 | Tennessee | 0.00 | 0.00 |
| Kansas | 0.00 | 0.00 | Texas | 0.00 | 0.00 |
| Kentucky | 0.00 | 0.00 | Utah | 0.00 | 0.00 |
| Louisiana | 0.00 | 0.00 | Vermont | 0.00 | 0.00 |
| Maine | 0.00 | 0.00 | Virginia | 0.00 | 0.00 |
| Maryland | 0.00 | 0.00 | Washington | 0.00 | 0.00 |
| Massachusetts | 0.00 | 0.00 | West Virginia | 0.00 | 0.00 |
| Michigan | 0.00 | 0.00 | Wisconsin | 0.00 | 0.00 |
| Minnesota | 0.00 | 0.00 | Wyoming | 0.00 | 0.00 |
| Mississippi | 0.00 | 0.00 | Puerto Rico | 0.00 | 0.00 |
| Missouri | 0.00 | 0.00 | Guam | 0.00 | 0.00 |
| Montana | 0.00 | 0.00 | Virgin Islands | 0.00 | 0.00 |
| | | | TOTALS | 0.00 | 0.00 |

Schedule A-P ITEMIZED RECEIPTS

| | |
|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 4 / 70 |
| | (check only one) |
| <input checked="" type="checkbox"/> 16 19a | <input type="checkbox"/> 17a 19b |
| <input type="checkbox"/> 17b 20a | <input type="checkbox"/> 17c 20b |
| <input type="checkbox"/> 17d 20c | <input type="checkbox"/> 18 21 |

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)
Kucinich for President 2008

| | | | |
|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) US Treasury | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8 | |
| Mailing Address 3700 E West Hwy Rm 6D37 | | Amount of Each Receipt this Period 11517.36 | |
| City State Zip Code Hyattsville MD 20782-2015 | | | |
| FEC ID number of contributing federal political committee. | | | |
| Name of Employer Occupation | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 34663.92 | |
| | | Transaction ID: C1658690 | |

| | | | |
|---|--|---|--|
| B. Full Name (Last, First, Middle Initial) US Treasury | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8 | |
| Mailing Address 3700 E West Hwy Rm 6D37 | | Amount of Each Receipt this Period 10960.26 | |
| City State Zip Code Hyattsville MD 20782-2015 | | | |
| FEC ID number of contributing federal political committee. | | | |
| Name of Employer Occupation | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 34663.92 | |
| | | Transaction ID: C1658692 | |

| | | | |
|---|--|---|--|
| C. Full Name (Last, First, Middle Initial) US Treasury | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 | |
| Mailing Address 3700 E West Hwy Rm 6D37 | | Amount of Each Receipt this Period 12186.30 | |
| City State Zip Code Hyattsville MD 20782-2015 | | | |
| FEC ID number of contributing federal political committee. | | | |
| Name of Employer Occupation | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 34663.92 | |
| | | Transaction ID: C1658693 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 34663.92 |
| TOTAL This Period (last page this line number only) ▶ | 34663.92 |

**Schedule A-P
ITEMIZED RECEIPTS**

| | | |
|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 5 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b | <input type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | |
|--|--|--------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Susan Barsotti | | Date of Receipt |
| | Mailing Address PO Box 337 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 2 / 2 0 0 8 |
| | City | State | Zip Code |
| | Laytonville | CA | 95454-0337 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 200.00 |
| Name of Employer SELF EMPLOYED | | Occupation landscaper | Transaction ID: C1708956 |
| Receipt For: 2008 | Election Cycle-to-Date ▼ | | |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 700.00 | |

| | | | |
|--|--|-----------------------|--|
| B. | Full Name (Last, First, Middle Initial) Lance Bisaccia | | Date of Receipt |
| | Mailing Address PO Box 579 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 5 / 2 0 0 8 |
| | City | State | Zip Code |
| | Ashland | OR | 97520-0020 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 100.00 |
| Name of Employer SELF | | Occupation TEACHER | Transaction ID: C1708455 |
| Receipt For: 2008 | Election Cycle-to-Date ▼ | | |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 300.00 | |

| | | | |
|--|--|-------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Lydia Blanchard | | Date of Receipt |
| | Mailing Address 142 Palo Verde Ter | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 4 / 2 0 0 8 |
| | City | State | Zip Code |
| | Santa Cruz | CA | 95060-3225 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 25.00 |
| Name of Employer SELF | | Occupation THERAPIST | Transaction ID: C1528198 |
| Receipt For: 2008 | Election Cycle-to-Date ▼ | | |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 275.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 325.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**Schedule A-P
ITEMIZED RECEIPTS**

| | | |
|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b | <input type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | |
|---|---|------------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Anita J. Coppock | | Date of Receipt |
| | Mailing Address 830 25th Street | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 0 / 2 0 0 8 |
| | City | State | Zip Code |
| | North Bend | OR | 97459 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 200.00 |
| Name of Employer teacher | | Occupation teacher | Transaction ID: C1553409 |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 350.00 | |

| | | | |
|---|--|------------------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Daniel M DeVere | | Date of Receipt |
| | Mailing Address 845 W Palmdale Blvd | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Palmdale | CA | 93551-4261 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 25.00 |
| Name of Employer AHLI | | Occupation Mortgage Broker | Transaction ID: C1528189 |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 225.00 | |

| | | | |
|---|---|------------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Leah A. Ditullio | | Date of Receipt |
| | Mailing Address 6856 Outlook Ave | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Oakland | CA | 94605 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 200.00 |
| Name of Employer La Mediterranee | | Occupation waitress | Transaction ID: C1528504 |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 700.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 425.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 7 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b | <input type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Amy I Frazee | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 874 Williams Lake Rd. | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 1 | 1 | / | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 2 | / | 1 | 1 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City State Zip Code Colville WA 99114 | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | <table border="1"> <tr> <td>100.00</td> </tr> </table> | | 100.00 | | | | | | | | | | | | | | | | | | | |
| 100.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation retired retired | Transaction ID: C1528305 | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ | <table border="1"> <tr> <td>300.00</td> </tr> </table> | 300.00 | | | | | | | | | | | | | | | | | | | |
| 300.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Judith W Gardner | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 1A Stevens Way | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 2 | 8 | / | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 2 | / | 2 | 8 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City State Zip Code Durham NH 03824 | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | <table border="1"> <tr> <td>50.00</td> </tr> </table> | | 50.00 | | | | | | | | | | | | | | | | | | | |
| 50.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation retired retired | Transaction ID: C1659696 | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ | <table border="1"> <tr> <td>400.00</td> </tr> </table> | 400.00 | | | | | | | | | | | | | | | | | | | |
| 400.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) John Maxwell Gault | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 620 Highland Dr | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 0 | 5 | / | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 2 | / | 0 | 5 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City State Zip Code Los Osos CA 93402-3802 | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | <table border="1"> <tr> <td>50.00</td> </tr> </table> | | 50.00 | | | | | | | | | | | | | | | | | | | |
| 50.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation None Retired | Transaction ID: C1708480 | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ | <table border="1"> <tr> <td>450.00</td> </tr> </table> | 450.00 | | | | | | | | | | | | | | | | | | | |
| 450.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | <table border="1"> <tr> <td>200.00</td> </tr> </table> | 200.00 |
| 200.00 | | |
| TOTAL This Period (last page this line number only) ▶ | <table border="1"> <tr> <td> </td> </tr> </table> | |
| | | |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 8 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b | <input type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Joy Goldstein | Date of Receipt MM / DD / YYYY 02 / 05 / 2008 |
| | Mailing Address 10329 SW Bank Rd | Amount of Each Receipt this Period 50.00 |
| | City State Zip Code Vashon WA 98070-4643 | |
| | FEC ID number of contributing federal political committee. | |
| | Name of Employer Occupation RETIRED RETIRED | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 550.00 | Transaction ID: C1708449 |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Connie S Hansen | Date of Receipt MM / DD / YYYY 02 / 07 / 2008 |
| | Mailing Address 43570 ROAD 813 | Amount of Each Receipt this Period -200.00 |
| | City State Zip Code Anselmo NE 68813-7033 | |
| | FEC ID number of contributing federal political committee. | |
| | Name of Employer Occupation MEDICAL TECHNOLOGIST BROKEN BOW CLINIC | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | Transaction ID: C1704307 |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Linda Harmon | Date of Receipt MM / DD / YYYY 02 / 05 / 2008 |
| | Mailing Address PO Box 257 | Amount of Each Receipt this Period 1000.00 |
| | City State Zip Code Hanapepe HI 96716-0257 | |
| | FEC ID number of contributing federal political committee. | |
| | Name of Employer Occupation RETIRED RETIRED | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1511.12 | Transaction ID: C1709078 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|--|-------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 9 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 19a | <input checked="" type="checkbox"/> 17a 19b | <input type="checkbox"/> 17b 20a |
| <input type="checkbox"/> 17c 20b | <input type="checkbox"/> 17d 20c | <input type="checkbox"/> 18 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Greg Hessick | Date of Receipt MM / DD / YYYY 02 / 12 / 2008 |
| | Mailing Address PO Box 58 | Amount of Each Receipt this Period 15.00 |
| | City State Zip Code Atascadero CA 93423 | |
| | FEC ID number of contributing federal political committee. | Transaction ID: C1549697 |
| | Name of Employer Occupation Atascadero State Hospital Sr Psychiatric Technician | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 715.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) Sally Hoover | Date of Receipt MM / DD / YYYY 02 / 04 / 2008 |
| | Mailing Address PO Box 1037 | Amount of Each Receipt this Period 250.00 |
| | City State Zip Code Ojai CA 93024-1037 | |
| | FEC ID number of contributing federal political committee. | Transaction ID: C1528205 |
| | Name of Employer Occupation retired retired | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Wael Khoury | Date of Receipt MM / DD / YYYY 02 / 28 / 2008 |
| | Mailing Address 10 Cableknoll Ln | Amount of Each Receipt this Period 1000.00 |
| | City State Zip Code Chagrin Falls OH 44022-1313 | |
| | FEC ID number of contributing federal political committee. | Transaction ID: C1659738 |
| | Name of Employer Occupation Self physician | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1265.00 |
| TOTAL This Period (last page this line number only) | |

Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 70

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <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)
Kucinich for President 2008

| | | | |
|---|-------------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Erazim Kohak | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 | |
| Mailing Address PO Box 355 | | Amount of Each Receipt this Period 100.00 | |
| City Jaffrey | State NH | Zip Code 03452-0355 | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1553884 | |
| Name of Employer Retired | Occupation Teacher | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1400.00 | | |

| | | | |
|---|------------------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Louise Lawler | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8 | |
| Mailing Address 1890 E 107Th St Apt 614 | | Amount of Each Receipt this Period 100.00 | |
| City Cleveland | State OH | Zip Code 44106-2251 | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1708700 | |
| Name of Employer RETIRED | Occupation RETIRED | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 425.00 | | |

| | | | |
|---|------------------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Louise Lawler | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 8 | |
| Mailing Address 1890 E 107Th St Apt 614 | | Amount of Each Receipt this Period 50.00 | |
| City Cleveland | State OH | Zip Code 44106-2251 | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1708701 | |
| Name of Employer RETIRED | Occupation RETIRED | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 425.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 250.00 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 11 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b | <input type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Luke Lundemo | Date of Receipt MM / DD / YYYY 02 / 11 / 2008 |
| | Mailing Address 597 Warrior Trl | Amount of Each Receipt this Period 100.00 |
| | City State Zip Code Jackson MS 39216-3227 | |
| | FEC ID number of contributing federal political committee. | |
| | Name of Employer self Occupation computer technician | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 650.00 | Transaction ID: C1528464 |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) Paul G Names | Date of Receipt MM / DD / YYYY 02 / 01 / 2008 |
| | Mailing Address 33008 Military Rd S | Amount of Each Receipt this Period 500.00 |
| | City State Zip Code Federal Way WA 98001-9636 | |
| | FEC ID number of contributing federal political committee. | |
| | Name of Employer retired Occupation retired | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | Transaction ID: C1528206 |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Dr Harold Osborn | Date of Receipt MM / DD / YYYY 02 / 05 / 2008 |
| | Mailing Address 590 Davenport Ave | Amount of Each Receipt this Period 250.00 |
| | City State Zip Code New Rochelle NY 10805-2111 | |
| | FEC ID number of contributing federal political committee. | |
| | Name of Employer SELF EMPLOYED Occupation DOCTOR | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 450.00 | Transaction ID: C1709257 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 70
(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <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)
Kucinich for President 2008

| | | | |
|---|------------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Anne L Pierce | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8 | |
| Mailing Address 333 Haumana Rd | | Amount of Each Receipt this Period 50.00 | |
| City Haiku | State HI | Zip Code 96708 | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1550690 | |
| Name of Employer Self | Occupation Massage Therapist | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 550.00 | | |

| | | | |
|---|------------------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Manuel & Nieves Pousada | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8 | |
| Mailing Address 18 Orchard St | | Amount of Each Receipt this Period 100.00 | |
| City Montrose | State NY | Zip Code 10548-1006 | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1709278 | |
| Name of Employer retired | Occupation retired | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 240.00 | | |

| | | | |
|---|--|---|--|
| C. Full Name (Last, First, Middle Initial) Randi Robertson | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 | |
| Mailing Address 71 Park Ave | | Amount of Each Receipt this Period 1000.00 | |
| City New York | State NY | Zip Code 10016-2507 | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1527270 | |
| Name of Employer Air America Radio | Occupation Progressive Talk Show Host | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1150.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 13 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 <input type="checkbox"/> 19a | <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b | <input type="checkbox"/> 17b <input type="checkbox"/> 20a |
| <input type="checkbox"/> 17c <input type="checkbox"/> 20b | <input type="checkbox"/> 17d <input type="checkbox"/> 20c | <input type="checkbox"/> 18 <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | |
|---|--|------------------------|---|
| A. | Full Name (Last, First, Middle Initial) John F Samore | | Date of Receipt MM / DD / YYYY 02 / 11 / 2008 |
| | Mailing Address P. B. Box 1993 | | Amount of Each Receipt this Period 100.00 |
| | City Albuquerque | State NM | |
| | FEC ID number of contributing federal political committee. | | Transaction ID: C1529220 |
| | Name of Employer self | Occupation attorney | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | | |

| | | | |
|---|--|-----------------------|---|
| B. | Full Name (Last, First, Middle Initial) Claire E E. Simpson | | Date of Receipt MM / DD / YYYY 02 / 07 / 2008 |
| | Mailing Address 196 Michelle Dr | | Amount of Each Receipt this Period 100.00 |
| | City Santa Fe | State NM | |
| | FEC ID number of contributing federal political committee. | | Transaction ID: C1527336 |
| | Name of Employer retired | Occupation RETIRED | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 355.00 | | |

| | | | |
|---|--|-----------------------|---|
| C. | Full Name (Last, First, Middle Initial) Olga Strickland | | Date of Receipt MM / DD / YYYY 02 / 06 / 2008 |
| | Mailing Address 945 W Fairway Dr | | Amount of Each Receipt this Period -100.00 |
| | City Mesa | State AZ | |
| | FEC ID number of contributing federal political committee. | | Insufficient Funds Transaction ID: C1689682 |
| | Name of Employer RETIRED | Occupation RETIRED | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 100.00 |
| TOTAL This Period (last page this line number only) | |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|--|-------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 14 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 19a | <input checked="" type="checkbox"/> 17a 19b | <input type="checkbox"/> 17b 20a |
| <input type="checkbox"/> 17c 20b | <input type="checkbox"/> 17d 20c | <input type="checkbox"/> 18 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | |
|---|---|------------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Norrie Thompson | | Date of Receipt |
| | Mailing Address 25 Rue Irene Sabatier 13920 St. Mitre-Les Remparts | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 4 / 2 0 0 8 |
| | City State Zip Code City State Zip Code | | Amount of Each Receipt this Period 240.00 |
| | FEC ID number of contributing federal political committee. | | |
| Name of Employer retired | | Occupation retired | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 490.00 | Transaction ID: C1525971 |

| | | | |
|---|---|------------------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Franklin A Torrence, Jr. | | Date of Receipt |
| | Mailing Address 650 Howell Prairie Rd SE | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 1 / 2 0 0 8 |
| | City State Zip Code Salem OR 97317-9095 | | Amount of Each Receipt this Period 500.00 |
| | FEC ID number of contributing federal political committee. | | |
| Name of Employer retired | | Occupation retired | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 500.00 | Transaction ID: C1557202 |

| | | | |
|---|--|-------------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Bob Unger | | Date of Receipt |
| | Mailing Address 1899 Hillsboro Dr | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 8 / 2 0 0 8 |
| | City State Zip Code Henderson NV 89074-0926 | | Amount of Each Receipt this Period 500.00 |
| | FEC ID number of contributing federal political committee. | | |
| Name of Employer Unger Development | | Occupation Real Estate Developer | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 500.00 | Transaction ID: C1527607 |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1240.00 |
| TOTAL This Period (last page this line number only) | |

**Schedule A-P
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 15 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b |
| <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <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)
Kucinich for President 2008

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Unitemized total | Date of Receipt |
| | Mailing Address n/a | <input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/> |
| | City State Zip Code n/a DC 00000 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | <input type="text" value="8839.00"/> |
| | Name of Employer Occupation | |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ <input type="text" value="8839.00"/> |
| | | Transaction ID: AAAAAA1 |

| | |
|--|---------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="8839.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="15494.00"/> |

**Schedule A-P
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 16 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b |
| <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input checked="" 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)
Kucinich for President 2008

| | | | |
|---|---|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Cuyahoga County Democratic Party | | Date of Receipt |
| | Mailing Address 1466 Saint Clair Ave NE | | <input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Cleveland | OH | 44114-2002 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period |
| | | 750.00 | |
| Name of Employer | | Occupation | |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General | <input type="text" value="750.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | | Transaction ID: C1676770 |

| | | | |
|---|--|-------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Nevada Power | | Date of Receipt |
| | Mailing Address 601 S Rancho Dr C 18 | | <input type="text" value="02"/> / <input type="text" value="19"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Las Vegas | NV | 89106 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period |
| | | 225.15 | |
| Name of Employer | | Occupation | |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General | <input type="text" value="225.15"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | | Transaction ID: C1672118 |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="975.15"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="975.15"/> |

Schedule A-P ITEMIZED RECEIPTS

| | | |
|---|------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 17 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b |
| <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <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 checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | |
|---|--|--------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Venture Bank | | Date of Receipt |
| | Mailing Address 5601 Green Valley Dr Ste 120 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8 |
| | City | State | Zip Code |
| | Bloomington | MN | 55437-1175 |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period |
| | | | 10.13 |
| Name of Employer | | Occupation | |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | | 396.65 | |
| | | | Transaction ID: C1675772 |

| | | |
|--|---|-------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 10.13 |
| TOTAL This Period (last page this line number only) | ▶ | 10.13 |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) American Express | Transaction ID: D94359 Date of Disbursement 02 / 25 / 2008 |
| | Mailing Address PO Box 1270 | Amount of Each Disbursement this Period 250.00 |
| | City Newark State NJ Zip Code 07101-1270 | |
| | Purpose of Disbursement Merchant Processing Fee Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Nic Baria | Transaction ID: D92302 Date of Disbursement 02 / 07 / 2008 |
| | Mailing Address 340 Central Ave H205 | Amount of Each Disbursement this Period 1800.00 |
| | City Dover State NH Zip Code 03820-3700 | |
| | Purpose of Disbursement Operations Consulting Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Kenneth M Brandon | Transaction ID: D94257 Date of Disbursement 02 / 29 / 2008 |
| | Mailing Address 1351 Maple View Pl SE | Amount of Each Disbursement this Period 2500.00 |
| | City Washington State DC Zip Code 20020-5709 | |
| | Purpose of Disbursement Fundraising Consulting Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 4550.00 |
| TOTAL This Period (last page this line number only) | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) Kenneth M Brandon Mailing Address 1351 Maple View Pl SE City Washington State DC Zip Code 20020-5709 Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94248 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 2500.00 |
| B. | Full Name (Last, First, Middle Initial) David L Bright Mailing Address 4262 Kennebec Rd City Dixmont State ME Zip Code 04932-3643 Purpose of Disbursement Operations Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94258 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 Amount of Each Disbursement this Period 1500.00 |
| C. | Full Name (Last, First, Middle Initial) Helen Broszczuk Mailing Address 6217 Holburn Rd City Parma State OH Zip Code 44129-4813 Purpose of Disbursement Office Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92193 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 225.00 |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4225.00 |
| TOTAL This Period (last page this line number only) | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Continental Airlines | Transaction ID: D94361 Date of Disbursement 02 / 04 / 2008 |
| | Mailing Address PO Box 4607 | Amount of Each Disbursement this Period 359.90 |
| | City Houston State TX Zip Code 77210-4607 | |
| | Purpose of Disbursement Travel | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Embarq | Transaction ID: D94364 Date of Disbursement 02 / 26 / 2008 |
| | Mailing Address P.O. Box 860068 | Amount of Each Disbursement this Period 601.10 |
| | City Dallas State TX Zip Code 75268 | |
| | Purpose of Disbursement Utilities | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Anabel Evora | Transaction ID: D92300 Date of Disbursement 02 / 07 / 2008 |
| | Mailing Address 777 NE 62nd St Apt C209 | Amount of Each Disbursement this Period 500.00 |
| | City Miami State FL Zip Code 33138-6404 | |
| | Purpose of Disbursement Communications Consulting | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1461.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Fedex Kinko's | Transaction ID: D94365 Date of Disbursement 02 / 06 / 2008 |
| | Mailing Address 13155 Noel Rd Three Galleria Tower | Amount of Each Disbursement this Period 37.46 |
| | City Dallas State TX Zip Code 75240-5067 | |
| | Purpose of Disbursement Delivery Service | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Fifth Third Bank | Transaction ID: D94368 Date of Disbursement 02 / 04 / 2008 |
| | Mailing Address PO Box 630900 | Amount of Each Disbursement this Period 7716.47 |
| | City Cincinnati State OH Zip Code 45263-0900 | |
| | Purpose of Disbursement Merchant Processing Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Fifth Third Bank | Transaction ID: D94369 Date of Disbursement 02 / 05 / 2008 |
| | Mailing Address PO Box 630900 | Amount of Each Disbursement this Period 46.66 |
| | City Cincinnati State OH Zip Code 45263-0900 | |
| | Purpose of Disbursement Merchant Processing Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 7800.59 |
| TOTAL This Period (last page this line number only) | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Fifth Third Bank Mailing Address PO Box 630900 City Cincinnati State OH Zip Code 45263-0900 Purpose of Disbursement Merchant Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94370 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 10.90 |
| B. | Full Name (Last, First, Middle Initial) Fifth Third Bank Mailing Address PO Box 630900 City Cincinnati State OH Zip Code 45263-0900 Purpose of Disbursement Merchant Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94371 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 3060.55 |
| C. | Full Name (Last, First, Middle Initial) Fifth Third Bank Mailing Address PO Box 630900 City Cincinnati State OH Zip Code 45263-0900 Purpose of Disbursement Merchant Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94372 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 523.47 |

SUBTOTAL of Disbursements This Page (optional) ▶

3594.92

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Fifth Third Bank | Transaction ID: D94376 Date of Disbursement 02 / 13 / 2008 |
| | Mailing Address PO Box 630900 | Amount of Each Disbursement this Period 2208.25 |
| | City Cincinnati State OH Zip Code 45263-0900 | |
| | Purpose of Disbursement Bank Fee Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Catherine Fish | Transaction ID: D92303 Date of Disbursement 02 / 07 / 2008 |
| | Mailing Address 120 Mount Vernon St | Amount of Each Disbursement this Period 400.00 |
| | City Dover State NH Zip Code 03820-2728 | |
| | Purpose of Disbursement Intern Stipend Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Hudson Bay Company | Transaction ID: D93777 Date of Disbursement 02 / 14 / 2008 |
| | Mailing Address 2006 1st Ave Ste 206 | Amount of Each Disbursement this Period 25796.79 |
| | City Anoka State MN Zip Code 55303-2255 | |
| | Purpose of Disbursement Fundraising Services Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

28405.04

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Bibiana Jancula | Transaction ID: D92188 |
| | Mailing Address 4267 W 140Th St | Date of Disbursement MM / DD / YYYY 02 / 06 / 2008 |
| | City Cleveland State OH Zip Code 44135-2111 | Amount of Each Disbursement this Period 110.00 |
| | Purpose of Disbursement Office Support Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Marilyn Jones | Transaction ID: D93756 |
| | Mailing Address 11823 Lorain Ave | Date of Disbursement MM / DD / YYYY 02 / 21 / 2008 |
| | City Cleveland State OH Zip Code 44111-5447 | Amount of Each Disbursement this Period 400.00 |
| | Purpose of Disbursement Intern Stipend Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Dana P Kimball | Transaction ID: D92196 |
| | Mailing Address 6 Bridgeview Terrace | Date of Disbursement MM / DD / YYYY 02 / 06 / 2008 |
| | City Kittery State ME Zip Code 03904 | Amount of Each Disbursement this Period 1650.00 |
| | Purpose of Disbursement Rent Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2160.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Christina Kraich-Rogers Mailing Address 16 Island Path Apt A City Hampton State NH Zip Code 03842 Purpose of Disbursement Operations Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D93695 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 1500.00 Category/ Type |
| B. | Full Name (Last, First, Middle Initial) Christina Kraich-Rogers Mailing Address 16 Island Path Apt A City Hampton State NH Zip Code 03842 Purpose of Disbursement Operations Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94256 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 Amount of Each Disbursement this Period 1500.00 Category/ Type |
| C. | Full Name (Last, First, Middle Initial) Marsha Krob Mailing Address 26749 Leenders Ln City North Olmsted State OH Zip Code 44070-2664 Purpose of Disbursement Operations Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94249 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 1500.00 Category/ Type |

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Marsha Krob | Transaction ID: D94259 |
| | Mailing Address 26749 Leenders Ln | Date of Disbursement 02 / 29 / 2008 |
| | City North Olmsted State OH Zip Code 44070-2664 | Amount of Each Disbursement this Period 1500.00 |
| | Purpose of Disbursement Operations Consulting Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Clara B. Lacey | Transaction ID: D94260 |
| | Mailing Address 14621 Glencliffe Rd | Date of Disbursement 02 / 29 / 2008 |
| | City Cleveland State OH Zip Code 44111-1351 | Amount of Each Disbursement this Period 1500.00 |
| | Purpose of Disbursement Office Support Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Clara B. Lacey | Transaction ID: D94250 |
| | Mailing Address 14621 Glencliffe Rd | Date of Disbursement 02 / 15 / 2008 |
| | City Cleveland State OH Zip Code 44111-1351 | Amount of Each Disbursement this Period 1500.00 |
| | Purpose of Disbursement Office Support Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 4500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Carol J Lade <hr/> Mailing Address 4418 Broadale Rd <hr/> City Cleveland State OH Zip Code 44109-3649 <hr/> Purpose of Disbursement Office Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D93755 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 405.00 |
| B. | Full Name (Last, First, Middle Initial) Carol J Lade <hr/> Mailing Address 4418 Broadale Rd <hr/> City Cleveland State OH Zip Code 44109-3649 <hr/> Purpose of Disbursement Office Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94261 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 375.00 |
| C. | Full Name (Last, First, Middle Initial) Carol J Lade <hr/> Mailing Address 4418 Broadale Rd <hr/> City Cleveland State OH Zip Code 44109-3649 <hr/> Purpose of Disbursement Office Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92189 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 199.00 |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 979.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Tom Lepley Mailing Address 4200 Westbrook Dr Apt 326 City Cleveland State OH Zip Code 44144-1202 Purpose of Disbursement Office Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92185 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 463.00 |
| B. | Full Name (Last, First, Middle Initial) Janice Matthews Mailing Address 7814 Terrace St City Kansas City State MO Zip Code 64114-1643 Purpose of Disbursement Intern Stipend Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94366 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 541.94 |
| C. | Full Name (Last, First, Middle Initial) Donald J McTigue Mailing Address 550 E Walnut St City Columbus State OH Zip Code 43215-5323 Purpose of Disbursement Legal Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D93742 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 5000.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

6004.94

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Casey Morgan <hr/> Mailing Address 3261 Canterbury Rd <hr/> City Westlake State OH Zip Code 44145-4616 <hr/> Purpose of Disbursement Office Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94251 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 200.00 |
| B. | Full Name (Last, First, Middle Initial) Casey Morgan <hr/> Mailing Address 3261 Canterbury Rd <hr/> City Westlake State OH Zip Code 44145-4616 <hr/> Purpose of Disbursement Office Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94262 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 200.00 |
| C. | Full Name (Last, First, Middle Initial) Paycor <hr/> Mailing Address 644 Linn St Ste 200 <hr/> City Cincinnati State OH Zip Code 45203-1734 <hr/> Purpose of Disbursement Payroll Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94254 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 289.74 |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 689.74 |
| TOTAL This Period (last page this line number only) ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Pitney Bowes | Transaction ID: D94374 |
| | Mailing Address 1 Elmcroft Rd | Date of Disbursement 02 / 05 / 2008 |
| | City Stamford State CT Zip Code 06926-0700 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement Postage Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Pitney Bowes | Transaction ID: D94375 |
| | Mailing Address 1 Elmcroft Rd | Date of Disbursement 02 / 21 / 2008 |
| | City Stamford State CT Zip Code 06926-0700 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement Postage Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Brennan Purtzer | Transaction ID: D92301 |
| | Mailing Address 946 NW Circle Blvd No 188 | Date of Disbursement 02 / 07 / 2008 |
| | City Corvallis State OR Zip Code 97330-1410 | Amount of Each Disbursement this Period 400.00 |
| | Purpose of Disbursement Operations Consulting Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1400.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) RapidForms | Transaction ID: D92197 Date of Disbursement 02 / 06 / 2008 |
| | Mailing Address 301 Grove Rd | |
| | City West Deptford State NJ Zip Code 08086-2214 | Amount of Each Disbursement this Period 173.87 |
| | Purpose of Disbursement Office Supplies Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Robert Ruszkowski | Transaction ID: D92298 Date of Disbursement 02 / 07 / 2008 |
| | Mailing Address 322 Harmony Lake Dr | |
| | City Holly Springs State GA Zip Code 30115-4599 | Amount of Each Disbursement this Period 2000.00 |
| | Purpose of Disbursement IT Consulting Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Olga Sarbinowska | Transaction ID: D94263 Date of Disbursement 02 / 29 / 2008 |
| | Mailing Address 7721 Alice Ave | |
| | City Cleveland State OH Zip Code 44105 | Amount of Each Disbursement this Period 310.00 |
| | Purpose of Disbursement Office Support Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2483.87 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Olga Sarbinowska Mailing Address 7721 Alice Ave City Cleveland State OH Zip Code 44105 Purpose of Disbursement Office Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94252 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 820.00 Category/Type |
| B. | Full Name (Last, First, Middle Initial) Dorothy Sech Mailing Address 2607 Walbrook Ave City Cleveland State OH Zip Code 44109-5546 Purpose of Disbursement Office Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92190 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 310.00 Category/Type |
| C. | Full Name (Last, First, Middle Initial) Security Now LLC Mailing Address 3579 Dean Dr City Barberton State OH Zip Code 44203-4507 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92305 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 234.00 Category/Type |

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| SUBTOTAL of Disbursements This Page (optional) | 1364.00 |
| TOTAL This Period (last page this line number only) | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Carol Skindell | Transaction ID: D92191 Date of Disbursement 02 / 06 / 2008 |
| | Mailing Address 2975 N. Bay Dr I-3 | Amount of Each Disbursement this Period 190.00 |
| | City Westlake State OH Zip Code 44145 | |
| | Purpose of Disbursement Office Support Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Sprint PCS | Transaction ID: D93741 Date of Disbursement 02 / 22 / 2008 |
| | Mailing Address 2001 Edmund Halley Dr | Amount of Each Disbursement this Period 110.88 |
| | City Reston State VA Zip Code 20191-3436 | |
| | Purpose of Disbursement Telephone Service Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Sprint PCS | Transaction ID: D93788 Date of Disbursement 02 / 26 / 2008 |
| | Mailing Address 2001 Edmund Halley Dr | Amount of Each Disbursement this Period 189.58 |
| | City Reston State VA Zip Code 20191-3436 | |
| | Purpose of Disbursement Telephone Service Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 490.46 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Erin Stamper Mailing Address 29592 County Road 108 City Elkhart State IN Zip Code 46514-9770 Purpose of Disbursement Operations Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92299 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 400.00 Category/ Type |
| B. | Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr City Framingham State MA Zip Code 01702-4478 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94377 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 148.13 Category/ Type |
| C. | Full Name (Last, First, Middle Initial) Steve Trager Mailing Address 11720 Edgewater Dr Apt P12 City Lakewood State OH Zip Code 44107-6712 Purpose of Disbursement Office Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92186 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 345.00 Category/ Type |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 893.13 |
| TOTAL This Period (last page this line number only) ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) U-Save Car & Truck Rental | Transaction ID: D94379 Date of Disbursement 02 / 04 / 2008 |
| | Mailing Address 4780 I-55 North Ste 300 | Amount of Each Disbursement this Period 488.22 |
| | City Jackson State MS Zip Code 39211 | |
| | Purpose of Disbursement Travel | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Venture Bank | Transaction ID: D94353 Date of Disbursement 02 / 04 / 2008 |
| | Mailing Address 5601 Green Valley Dr Ste 120 | Amount of Each Disbursement this Period 1657.52 |
| | City Bloomington State MN Zip Code 55437-1175 | |
| | Purpose of Disbursement Merchant Fee | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Venture Bank | Transaction ID: D94354 Date of Disbursement 02 / 05 / 2008 |
| | Mailing Address 5601 Green Valley Dr Ste 120 | Amount of Each Disbursement this Period 250.00 |
| | City Bloomington State MN Zip Code 55437-1175 | |
| | Purpose of Disbursement Merchant Fee | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

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| SUBTOTAL of Disbursements This Page (optional) | 2395.74 |
| TOTAL This Period (last page this line number only) | |

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Venture Bank <hr/> Mailing Address 5601 Green Valley Dr Ste 120 <hr/> City Bloomington State MN Zip Code 55437-1175 <hr/> Purpose of Disbursement Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94355 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.00 |
| B. | Full Name (Last, First, Middle Initial) Venture Bank <hr/> Mailing Address 5601 Green Valley Dr Ste 120 <hr/> City Bloomington State MN Zip Code 55437-1175 <hr/> Purpose of Disbursement Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94356 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 200.00 |
| C. | Full Name (Last, First, Middle Initial) Venture Bank <hr/> Mailing Address 5601 Green Valley Dr Ste 120 <hr/> City Bloomington State MN Zip Code 55437-1175 <hr/> Purpose of Disbursement Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D94357 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 9.62 |

SUBTOTAL of Disbursements This Page (optional) ▶

309.62

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Derek Walpole | Transaction ID: D94255 Date of Disbursement 02 / 19 / 2008 |
| | Mailing Address PO Box 110475 | Amount of Each Disbursement this Period 300.00 |
| | City Cleveland State OH Zip Code 44111-0475 | |
| | Purpose of Disbursement Intern Stipend | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Sheila Williams | Transaction ID: D94253 Date of Disbursement 02 / 15 / 2008 |
| | Mailing Address 11823 Lorain Ave Apt 10 | Amount of Each Disbursement this Period 552.50 |
| | City Cleveland State OH Zip Code 44111-5405 | |
| | Purpose of Disbursement Office Support | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Sheila Williams | Transaction ID: D93757 Date of Disbursement 02 / 21 / 2008 |
| | Mailing Address 11823 Lorain Ave Apt 10 | Amount of Each Disbursement this Period 297.50 |
| | City Cleveland State OH Zip Code 44111-5405 | |
| | Purpose of Disbursement Office Support | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1150.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 40 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Sheila Williams Mailing Address 11823 Lorain Ave Apt 10 City Cleveland State OH Zip Code 44111-5405 Purpose of Disbursement Office Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92187 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 765.82 |
| B. | Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D92939 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 22219.90 |
| C. | Full Name (Last, First, Middle Initial) Unitemized total Mailing Address n/a City n/a State DC Zip Code 00000 Purpose of Disbursement Unitemized total Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BBBB1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 Amount of Each Disbursement this Period 595.92 |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) | 23581.64 |
| TOTAL This Period (last page this line number only) | 107420.69 |

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 41 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Miriam I Ahmed <hr/> Mailing Address 2327 Beaver Crk <hr/> City Westlake State OH Zip Code 44145-4375 <hr/> Purpose of Disbursement Contribution Refund Candidate Name | Transaction ID: D93754 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 2 | 0 | / | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | |
| | 0 | 2 | / | 2 | 0 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | |
| Amount of Each Disbursement this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> | 200.00 | | | | | | | | | | | | | | | | | | | | |
| 200.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Louise Clark <hr/> Mailing Address 6 Blackthorn Rd <hr/> City Lafayette State CA Zip Code 94549-3307 <hr/> Purpose of Disbursement Contribution Refund Candidate Name | Transaction ID: D93744 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 2 | 0 | / | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | |
| | 0 | 2 | / | 2 | 0 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | |
| Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> | 500.00 | | | | | | | | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Stephanie Farago <hr/> Mailing Address 141 Kapuai Rd <hr/> City Haiku State HI Zip Code 96708-5224 <hr/> Purpose of Disbursement Contribution Refund Candidate Name | Transaction ID: D93750 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 2 | 0 | / | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | |
| | 0 | 2 | / | 2 | 0 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | |
| Amount of Each Disbursement this Period <table border="1"> <tr> <td>700.00</td> </tr> </table> | 700.00 | | | | | | | | | | | | | | | | | | | | |
| 700.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | <table border="1"> <tr> <td>1400.00</td> </tr> </table> | 1400.00 |
| 1400.00 | | |
| TOTAL This Period (last page this line number only) ▶ | <table border="1"> <tr> <td> </td> </tr> </table> | |
| | | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Deborah K Haggis | Transaction ID: D93753 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 206 S Brand Blvd | Amount of Each Disbursement this Period 200.00 |
| | City Glendale State CA Zip Code 91204-1310 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Mr. Robert Frank Herrera | Transaction ID: D93752 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 16545 Twin Lakes Dr | Amount of Each Disbursement this Period 100.00 |
| | City Royal Oaks State CA Zip Code 95076-9025 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Irene E Lynch | Transaction ID: D93747 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 39 Fairway E | Amount of Each Disbursement this Period 400.00 |
| | City Colts Neck State NJ Zip Code 07722-1418 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 700.00 |
| TOTAL This Period (last page this line number only) | |

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Emily M. Maloney | Transaction ID: D93749 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 141-34th Avenue | Amount of Each Disbursement this Period 750.00 |
| | City Santa Cruz State CA Zip Code 95062-5507 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Arthur Mark | Transaction ID: D93775 Date of Disbursement 02 / 12 / 2008 |
| | Mailing Address 7 Fox Dr | Amount of Each Disbursement this Period 2275.00 |
| | City Narragansett State RI Zip Code 02882-4842 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Dorothy Jeane Mock | Transaction ID: D93746 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 212 Skyland Dr | Amount of Each Disbursement this Period 200.00 |
| | City Pisgah Forest State NC Zip Code 28768-9884 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 3225.00 |
| TOTAL This Period (last page this line number only) | |

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Franklin W Stahl | Transaction ID: D93745 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 2525 Floral Hill Dr | Amount of Each Disbursement this Period 150.00 |
| | City Eugene State OR Zip Code 97403-2816 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Diego Taylor | Transaction ID: D93751 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address 200 Park Avenue | Amount of Each Disbursement this Period 330.00 |
| | City Del Rio State TX Zip Code 78840 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Katharine T. Thompson | Transaction ID: D93748 Date of Disbursement 02 / 20 / 2008 |
| | Mailing Address PO Box 48 | Amount of Each Disbursement this Period 1000.00 |
| | City South Tamworth State NH Zip Code 03883 | |
| | Purpose of Disbursement Contribution Refund Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1480.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 70

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

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NAME OF COMMITTEE (In Full)
Kucinich for President 2008

A.

Full Name (Last, First, Middle Initial)
Carol Perera Weingeist

Transaction ID: D93265

Date of Disbursement

Mailing Address 38 Valley Road Ext

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 1 | 2 | | 2 | 0 | 0 | 8 |

City Hanover State NH Zip Code 03755-2218

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Purpose of Disbursement
Refund of Contribution

| |
|--|
| |
|--|

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|--------|
| 100.00 |
|--------|

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

| |
|---------|
| 6905.00 |
|---------|

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Akrobiz.com | | | Nature of Debt (Purpose): Web Hosting |
| Mailing Address 58 Marshall Ave | | | |
| City Akron | State OH | ZIP Code 44303-1410 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="400.00"/> | | Transaction ID: D124734 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="400.00"/> | |

| | | | |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Susan Alzner | | | Nature of Debt (Purpose): Field Staff |
| Mailing Address 164 Whitehall Blvd | | | |
| City Garden City | State NY | ZIP Code 11530-1435 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="913.74"/> | | Transaction ID: D95570 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="913.74"/> | |

| | | | |
|---|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | | | Nature of Debt (Purpose): Telephone Service |
| Mailing Address PO Box 8100 | | | |
| City Aurora | State IL | ZIP Code 60507-8100 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | | Transaction ID: D124732 | |
| Amount Incurred This Period <input type="text" value="207.14"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="207.14"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1520.88"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T | | | Nature of Debt (Purpose): Telephone Service |
| Mailing Address PO Box 8100 | | | |
| City Aurora | State IL | ZIP Code 60507-8100 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="3361.90"/> | | Transaction ID: D95473 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="3361.90"/> | |

| | | | |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jon Ausman | | | Nature of Debt (Purpose): Field Staff |
| Mailing Address 2202 Woodlawn Dr | | | |
| City Tallahassee | State FL | ZIP Code 32303-3915 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="1250.00"/> | | Transaction ID: D124670 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1250.00"/> | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kenneth M Brandon | | | Nature of Debt (Purpose): Campaign Management |
| Mailing Address 1351 Maple View Pl SE | | | |
| City Washington | State DC | ZIP Code 20020-5709 | |

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|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="6150.27"/> | | Transaction ID: D124698 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="6150.27"/> | |

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|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="10762.17"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor David L Bright | | | Nature of Debt (Purpose): Field Consulting |
| Mailing Address 4262 Kennebec Rd | | | |
| City Dixmont | State ME | ZIP Code 04932-3643 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 7064.90 | | Transaction ID: D124700 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 7064.90 | |

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|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul H Brock | | | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 3207 Old Largo Rd | | | |
| City Upper Marlboro | State MD | ZIP Code 20772-7814 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 2423.04 | | Transaction ID: D95488 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2423.04 | |

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|---|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michael Carmichael | | | Nature of Debt (Purpose): Strategic Consulting |
| Mailing Address 132 S Salisbury St | | | |
| City Raleigh | State NC | ZIP Code 27601-1344 | |

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|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 4660.90 | | Transaction ID: D95485 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4660.90 | |

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|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 14148.84 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cleveland Copytech | | | Nature of Debt (Purpose): Office Equipment Rental |
| Mailing Address 14915 Marks Rd | | | |
| City Strongsville | State OH | ZIP Code 44149-4710 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 501.65 | | Transaction ID: D124736 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 501.65 | |

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|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steve Cobble | | | Nature of Debt (Purpose): Strategic Consulting |
| Mailing Address 609 Irving St NW | | | |
| City Washington | State DC | ZIP Code 20010-2905 | |

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|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1968.17 | | Transaction ID: D95490 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1968.17 | |

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|--|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Current Marketing Group | | | Nature of Debt (Purpose): Media Production |
| Mailing Address 741 Coventry St | | | |
| City Boca Raton | State FL | ZIP Code 33487-3104 | |

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|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 5000.00 | | Transaction ID: D95475 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 5000.00 | |

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|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ 7469.82 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Delanoy, Schuetze & McGaha P.C | | | Nature of Debt (Purpose): Legal Services |
| Mailing Address 601 S Rancho Dr Ste C20 | | | |
| City Las Vegas | State NV | ZIP Code 89106-4825 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 10705.00 | | Transaction ID: D95476 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 10705.00 | |

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|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DirecTV | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 60036 | | | |
| City Los Angeles | State CA | ZIP Code 90060-0036 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 84.30 | | Transaction ID: D95561 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 84.30 | |

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|---|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marty Fujita | | | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 602 Palomar Rd | | | |
| City Ojai | State CA | ZIP Code 93023-1740 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 9000.00 | | Transaction ID: D95484 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 9000.00 | |

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|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 19789.30 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Full Spectrum Productions | | | Nature of Debt (Purpose): Media Production |
| Mailing Address 409 E Holcomb Ave | | | |
| City Des Moines | State IA | ZIP Code 50313-5027 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="500.00"/> | | Transaction ID: D124705 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="500.00"/> | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geary Internet Strategies | | | Nature of Debt (Purpose): IT Consulting |
| Mailing Address 3136 E Russell Rd | | | |
| City Las Vegas | State NV | ZIP Code 89120-3463 | |

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|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="40.00"/> | | Transaction ID: D124708 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="40.00"/> | |

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|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geary Internet Strategies | | | Nature of Debt (Purpose): IT Consulting |
| Mailing Address 3136 E Russell Rd | | | |
| City Las Vegas | State NV | ZIP Code 89120-3463 | |

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|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="15000.00"/> | | Transaction ID: D124710 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="15000.00"/> | |

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|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="15540.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Geary Internet Strategies | | | Nature of Debt (Purpose): IT Consulting |
| Mailing Address 3136 E Russell Rd | | | |
| City Las Vegas | State NV | ZIP Code 89120-3463 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="29112.71"/> | | Transaction ID: D95479 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="29112.71"/> | |

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|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vin Gopal | | | Nature of Debt (Purpose): Campaign Management |
| Mailing Address 3587 US Highway 9 Ste 457 | | | |
| City Freehold | State NJ | ZIP Code 07728-3288 | |

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|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="10681.64"/> | | Transaction ID: D95571 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="10681.64"/> | |

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|--|-------------|------------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ed Helm | | | Nature of Debt (Purpose): Printing |
| Mailing Address 2900 68th Ave S | | | |
| City St Petersburg | State FL | ZIP Code 33712-5525 | |

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|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="600.00"/> | | Transaction ID: D124703 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="600.00"/> | |

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|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="40394.35"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michael Hudson | | | Nature of Debt (Purpose): Economic Policy Consulting |
| Mailing Address 11808 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44111-5445 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 9000.00 | | Transaction ID: D95564 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 9000.00 | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hudson Bay Company | | | Nature of Debt (Purpose): Fundraising Services |
| Mailing Address 2006 1st Ave Ste 206 | | | |
| City Anoka | State MN | ZIP Code 55303-2255 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 163450.77 | | Transaction ID: D95480 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 163450.77 | |

| | | | |
|--|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joseph A Turner, PC | | | Nature of Debt (Purpose): Legal Services |
| Mailing Address 1504 West Ave | | | |
| City Austin | State TX | ZIP Code 78701-1530 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 3467.25 | | Transaction ID: D96593 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3467.25 | |

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| 1) SUBTOTALS This Period This Page (optional)..... | 175918.02 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Juniewicz PR, Inc. | | | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 1610 Lewis Dr | | | |
| City Lakewood | State OH | ZIP Code 44107-4830 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 2908.20 | | Transaction ID: D95481 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2908.20 | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michael Klein | | | Nature of Debt (Purpose): Campaign Management |
| Mailing Address 117 Courts Ln | | | |
| City Little Rock | State AR | ZIP Code 72223-9018 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 15702.17 | | Transaction ID: D95486 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 15702.17 | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marsha Krob | | | Nature of Debt (Purpose): Operations Consulting |
| Mailing Address 26749 Leenders Ln | | | |
| City North Olmsted | State OH | ZIP Code 44070-2664 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 825.45 | | Transaction ID: D124692 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 825.45 | |

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| 1) SUBTOTALS This Period This Page (optional)..... | 19435.82 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Krompak Communications, LLC | | | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 425 Jefferson Ave Ste 645 | | | |
| City Toledo | State OH | ZIP Code 43604-1060 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95560 | |
| 7000.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 7000.00 | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lightyear Network Solutions, LLC | | | Nature of Debt (Purpose): Internet Service |
| Mailing Address PO Box 740050 | | | |
| City Cincinnati | State OH | ZIP Code 45274-0050 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124673 | |
| 596.16 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 596.16 | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Madison Graphics | | | Nature of Debt (Purpose): Printing |
| Mailing Address 13130 Detroit Ave | | | |
| City Lakewood | State OH | ZIP Code 44107-2840 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95482 | |
| 19510.21 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 19510.21 | |

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| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 27106.37 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|-------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard McCampbell | | | Nature of Debt (Purpose): Travel |
| Mailing Address 16 Craig St | | | |
| City Milton | State MA | ZIP Code 02186-2511 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 310.01 | | Transaction ID: D124695 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 310.01 | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tim McHugh | | | Nature of Debt (Purpose): Media Consulting |
| Mailing Address 1299 Boston St | | | |
| City Altadena | State CA | ZIP Code 91001-3123 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 443.04 | | Transaction ID: D124677 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 443.04 | |

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|---|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tim McHugh | | | Nature of Debt (Purpose): Media Consulting |
| Mailing Address 1299 Boston St | | | |
| City Altadena | State CA | ZIP Code 91001-3123 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 2250.00 | | Transaction ID: D124723 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2250.00 | |

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| 1) SUBTOTALS This Period This Page (optional)..... | 3003.05 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donald J McTigue | | | Nature of Debt (Purpose): Legal Services |
| Mailing Address 550 E Walnut St | | | |
| City Columbus | State OH | ZIP Code 43215-5323 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 20890.06 | | Transaction ID: D95497 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 20890.06 | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donald J McTigue | | | Nature of Debt (Purpose): Legal Services |
| Mailing Address 550 E Walnut St | | | |
| City Columbus | State OH | ZIP Code 43215-5323 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 136082.56 | | Transaction ID: D95498 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 136082.56 | |

| | | | |
|--|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steve Merrick | | | Nature of Debt (Purpose): Media Production |
| Mailing Address 8117 W Manchester Ave # 369 | | | |
| City Playa Del Rey | State CA | ZIP Code 90293-8745 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 11760.00 | | Transaction ID: D95477 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 11760.00 | |

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|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 168732.62 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steve Merrick | Nature of Debt (Purpose): Media Production |
| Mailing Address 8117 W Manchester Ave # 369 | |
| City State ZIP Code Playa Del Rey CA 90293-8745 | |

| | | |
|--|--------------------------------|--|
| Outstanding Balance Beginning This Period 3312.81 | Transaction ID: D133714 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3312.81 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Evan Moody | Nature of Debt (Purpose): Fundraising Services |
| Mailing Address 18 Watchwater Way | |
| City State ZIP Code Rockville MD 20850-2742 | |

| | | |
|--|-------------------------------|--|
| Outstanding Balance Beginning This Period 7648.95 | Transaction ID: D95478 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 7648.95 |

| | |
|---|-------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Epphuras Sserwadda Msafiri | Nature of Debt (Purpose): Travel |
| Mailing Address 16 Kampala Rd | |
| City State ZIP Code Uganda | |

| | | |
|--|--------------------------------|--|
| Outstanding Balance Beginning This Period 1062.77 | Transaction ID: D124739 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1062.77 |

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|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 12024.53 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor N2Net | Nature of Debt (Purpose): Web Hosting |
| Mailing Address 815 Superior Ave E Ste 425 | |
| City Cleveland State OH ZIP Code 44114-2704 | |

| | | |
|--|--------------------------------|--|
| Outstanding Balance Beginning This Period 5675.90 | Transaction ID: D124729 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 5675.90 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor News Broadcast Network | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 51 Locust Ave Ste 203 | |
| City New Canaan State CT ZIP Code 06840-4739 | |

| | | |
|--|-------------------------------|--|
| Outstanding Balance Beginning This Period 3750.00 | Transaction ID: D95565 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3750.00 |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software, Inc | Nature of Debt (Purpose): Legal Services |
| Mailing Address 1225 I St NW Ste 1225 | |
| City Washington State DC ZIP Code 20005-5918 | |

| | | |
|---|--------------------------------|--|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: D124727 | |
| Amount Incurred This Period 6732.94 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 6732.94 |

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|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 16158.84 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------|------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software, Inc | | | Nature of Debt (Purpose): Database Services |
| Mailing Address 1225 I St NW Ste 1225 | | | |
| City | State | ZIP Code | |
| Washington | DC | 20005-5918 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95487 | |
| 0.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 887.25 | 0.00 | 887.25 | |

| | | | |
|---|-------|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northern Utilities | | | Nature of Debt (Purpose): Utilities |
| Mailing Address 2025 Roosevelt Ave | | | |
| City | State | ZIP Code | |
| Springfield | MA | 01104-1657 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124675 | |
| 1866.49 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 1866.49 | |

| | | | |
|---|-------|------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Northern Utilities | | | Nature of Debt (Purpose): Utilities |
| Mailing Address 2025 Roosevelt Ave | | | |
| City | State | ZIP Code | |
| Springfield | MA | 01104-1657 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124684 | |
| 147.30 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 147.30 | |

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|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 2901.04 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------|------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor OCI Retail Computer Sciences | | | Nature of Debt (Purpose): Database Services |
| Mailing Address 1835 S Centre City Pkwy Ste A | | | |
| City | State | ZIP Code | |
| Escondido | CA | 92025-6504 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95574 | |
| 1500.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 1500.00 | |

| | | | |
|--|-------|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stephanie Olson | | | Nature of Debt (Purpose): Field Consulting Expenses |
| Mailing Address 3845 Harrison St Apt 304 | | | |
| City | State | ZIP Code | |
| Oakland | CA | 94611-5059 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124823 | |
| 1241.37 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 1241.37 | |

| | | | |
|---|-------|------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor People's Email Network | | | Nature of Debt (Purpose): Fundraising Services |
| Mailing Address PO Box 35022 | | | |
| City | State | ZIP Code | |
| Los Angeles | CA | 90035-0022 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124669 | |
| 7460.14 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 7460.14 | |

| | | |
|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 10201.51 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Progressive Store | | | Nature of Debt (Purpose): Campaign Merchandise |
| Mailing Address 1910 Glen Allen Ln | | | |
| City Altadena | State CA | ZIP Code 91001-2135 | |

| | | | |
|---|-----------------------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124721 | |
| <input type="text" value="0.00"/> | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| <input type="text" value="30412.36"/> | <input type="text" value="0.00"/> | <input type="text" value="30412.36"/> | |

| | | | |
|---|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Progressive Store | | | Nature of Debt (Purpose): Campaign Merchandise |
| Mailing Address 1910 Glen Allen Ln | | | |
| City Altadena | State CA | ZIP Code 91001-2135 | |

| | | | |
|---|-----------------------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95499 | |
| <input type="text" value="44082.68"/> | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| <input type="text" value="0.00"/> | <input type="text" value="0.00"/> | <input type="text" value="44082.68"/> | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PSNH | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 360 | | | |
| City Manchester | State NH | ZIP Code 03105-0360 | |

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|---|-----------------------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124666 | |
| <input type="text" value="31.54"/> | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| <input type="text" value="0.00"/> | <input type="text" value="0.00"/> | <input type="text" value="31.54"/> | |

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|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="74526.58"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PSNH | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 360 | | | |
| City Manchester | State NH | ZIP Code 03105-0360 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="31.17"/> | | Transaction ID: D124667 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="31.17"/> | |

| | | | |
|--|-------------|------------------------|-------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rockstar Limo | | | Nature of Debt (Purpose): Travel |
| Mailing Address 23 Memorial Blvd | | | |
| City Newport | State RI | ZIP Code 02840-3510 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="5000.00"/> | | Transaction ID: D95489 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="5000.00"/> | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marcos Rubenstein | | | Nature of Debt (Purpose): Field Consulting Expenses |
| Mailing Address 663 Fenelon Pl | | | |
| City Dubuque | State IA | ZIP Code 52001-6634 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="3549.15"/> | | Transaction ID: D95483 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="3549.15"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="8580.32"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marcos Rubenstein | | | Nature of Debt (Purpose): Field Consulting |
| Mailing Address 663 Fenelon Pl | | | |
| City Dubuque | State IA | ZIP Code 52001-6634 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="6600.00"/> | | Transaction ID: D133702 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="6600.00"/> | |

| | | | |
|--|-------------|------------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jane Shirek | | | Nature of Debt (Purpose): Photography Fees |
| Mailing Address 1555 S Crescent Heights Blvd | | | |
| City Los Angeles | State CA | ZIP Code 90035-3817 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="1000.00"/> | | Transaction ID: D124715 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1000.00"/> | |

| | | | |
|---|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint PCS | | | Nature of Debt (Purpose): Telephone Service |
| Mailing Address 2001 Edmund Halley Dr | | | |
| City Reston | State VA | ZIP Code 20191-3436 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="120.77"/> | | Transaction ID: D124681 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="120.77"/> | |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="7720.77"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tom Staudter | | | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 1 Sleator Dr | | | |
| City Ossining | State NY | ZIP Code 10562-3918 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 10500.00 | | Transaction ID: D95500 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 10500.00 | |

| | | | |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tom Staudter | | | Nature of Debt (Purpose): Communications Consulting |
| Mailing Address 1 Sleator Dr | | | |
| City Ossining | State NY | ZIP Code 10562-3918 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1264.22 | | Transaction ID: D95501 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1264.22 | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 16982.93 | | Transaction ID: D95491 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 16982.93 | |

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|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 28747.15 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="862.00"/> | | Transaction ID: D95492 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="862.00"/> | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="5926.25"/> | | Transaction ID: D95493 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="5926.25"/> | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="4848.75"/> | | Transaction ID: D95494 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="4848.75"/> | |

| | |
|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="11637.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 49026.25 | | Transaction ID: D95495 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 49026.25 | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 5387.50 | | Transaction ID: D95496 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 5387.50 | |

| | | | |
|---|-------------|------------------------|---------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suburban Press Inc | | | Nature of Debt (Purpose): Printing |
| Mailing Address 3818 Lorain Ave | | | |
| City Cleveland | State OH | ZIP Code 44113-3711 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 4149.09 | | Transaction ID: D95572 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4149.09 | |

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|--|------------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ 58562.84 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Hook | | | Nature of Debt (Purpose): Press Services |
| Mailing Address 100 2nd St NW | | | |
| City Charlottesville | State VA | ZIP Code 22902-5193 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 1200.00 | | Transaction ID: D95573 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1200.00 | |

| | | | |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Illuminating Company | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 3638 | | | |
| City Akron | State OH | ZIP Code 44309-3638 | |

| | | | |
|--|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 25.76 | | Transaction ID: D124687 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 25.76 | |

| | | | |
|--|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS | | | Nature of Debt (Purpose): Delivery Service |
| Mailing Address PO Box 7247 | | | |
| City Philadelphia | State PA | ZIP Code 19170-0001 | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 30120.00 | | Transaction ID: D95502 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 30120.00 | |

| | | |
|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 31345.76 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|---|-------|------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Urban Consulting Group | | | Nature of Debt (Purpose): Field Consulting |
| Mailing Address 7700 2nd Ave Ste 608 | | | |
| City | State | ZIP Code | |
| Detroit | MI | 48202-2411 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95469 | |
| 18435.18 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 18435.18 | |

| | | | |
|--|-------|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Charmian Washburn | | | Nature of Debt (Purpose): Operations Consulting |
| Mailing Address 211 Tanager Ln NW | | | |
| City | State | ZIP Code | |
| Floyd | VA | 24091-2534 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95575 | |
| 517.82 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 517.82 | |

| | | | |
|--|-------|------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christopher Wedge | | | Nature of Debt (Purpose): Field Consulting |
| Mailing Address 1641 Ashworth Ct | | | |
| City | State | ZIP Code | |
| Reno | NV | 89521-6123 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D95474 | |
| 5000.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 5000.00 | |

| | | |
|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 23953.00 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

| | | |
|---|--------------------------------------|----|
| (Use separate schedule(s) for each numbered line) | PAGE 70 / 70 | |
| | FOR LINE NUMBER: (check only one) | |
| | <input type="checkbox"/> | 11 |
| | <input checked="" type="checkbox"/> | 12 |

NAME OF COMMITTEE (In Full)
 Kucinich for President 2008

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Williams C Velasquez Institute | | | Nature of Debt (Purpose): Facility Rental |
| Mailing Address 206 Lombard Dr Ste 1 | | | |
| City San Antonio | State TX | ZIP Code 78226-1871 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D124668 | |
| 1000.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 1000.00 | |

| | | |
|--|---|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1000.00 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | 791180.58 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | 791180.58 |