



**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3P)

Name of committee (in full) <b>Chris Dodd For President Inc</b>		Report Covering the Period From: 07/01/2009 To: 09/30/2009	
<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	1961741.71	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees .....	0.00	10078771.95	
(b) Political Party Committees .....	0.00	100.00	
(c) Other Political Committees .....	0.00	760698.30	
(d) The Candidate .....	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) .....	0.00	10839570.25	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	4739005.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00	
(b) Other Loans .....	0.00	1302811.25	
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	1302811.25	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating .....	0.00	126636.07	
(b) Fundraising .....	0.00	5240.00	
(c) Legal and Accounting .....	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	0.00	131876.07	
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....	39.96	-304662.47	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....	39.96	18670341.81	
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES .....	17244.39	15496215.83	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	440110.00	
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	1302811.25	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....	0.00	1302811.25	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees .....	0.00	1190442.00	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees .....	0.00	172258.30	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....	0.00	1362700.30	
29. OTHER DISBURSEMENTS .....	0.00	11000.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	17244.39	18612837.38	
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00		

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 38**  
**(Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)**  
(PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

### 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	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	694906.41
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	41.21	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	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	2510687.16	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	68.00	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
			<b>TOTALS</b>	<b>0.00</b>	<b>3237648.79</b>

**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)  
Chris Dodd For President Inc

<b>A.</b>	Full Name (Last, First, Middle Initial) Advantage Payroll Services <hr/> Mailing Address 126 Marrow Road <hr/> City Auburn State ME Zip Code 04210 <hr/> Purpose of Disbursement Processing 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: B691F2CFE02B44FCEA3F Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 75.93
<b>B.</b>	Full Name (Last, First, Middle Initial) Advantage Payroll Services <hr/> Mailing Address 126 Marrow Road <hr/> City Auburn State ME Zip Code 04210 <hr/> Purpose of Disbursement Processing 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: B010DD5F8660943CA94B Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 75.93
<b>C.</b>	Full Name (Last, First, Middle Initial) Advantage Payroll Services <hr/> Mailing Address 126 Marrow Road <hr/> City Auburn State ME Zip Code 04210 <hr/> Purpose of Disbursement Processing 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: B6CE30159EC994C21BFF Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 80.19

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

**232.05**

**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)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address PO Box 981535 <hr/> City El Paso State TX Zip Code 79998-1535 <hr/> Purpose of Disbursement 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: B63F4FD2EEF524D4A917 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 5.95
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Authorize.net <hr/> Mailing Address 915 South 500 East, Ste. 200 <hr/> City American Fork State UT Zip Code 84003-3373 <hr/> Purpose of Disbursement Processing 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: B67A939E127B7488D9B1 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Authorize.net <hr/> Mailing Address 915 South 500 East, Ste. 200 <hr/> City American Fork State UT Zip Code 84003-3373 <hr/> Purpose of Disbursement Processing 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: B9C8215E6EFC541A3BFA Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

55.95

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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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)  
Chris Dodd For President Inc

<p><b>A.</b> Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 South 500 East, Ste. 200</p> <p>City American Fork State UT Zip Code 84003-3373</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA98598DF4A014BD4B2A</p> <p>Date of Disbursement 09 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) BankCard</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B924CF34E9FE04A38B4C</p> <p>Date of Disbursement 07 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 64.95</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BankCard</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD251516617FB4636890</p> <p>Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 64.95</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>154.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BankCard</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BE89902AABB274961B38</p> <p>Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 64.95</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City State Zip Code Hartford CT 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD4C9260A694446C3880</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 56.00</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City State Zip Code Hartford CT 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B14B64380E8BB4CE7A3C</p> <p>Date of Disbursement 07 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 53.44</p> <p>Category/ Type</p>

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

174.39

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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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
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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <hr/> Purpose of Disbursement Taxes 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: BB07F3C4BE18442DDB96 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 40.31
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <hr/> Purpose of Disbursement Taxes 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: B0875790FE82643F2AB7 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 40.31
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> City Hartford State CT Zip Code 06106 <hr/> Purpose of Disbursement Taxes 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: B1DE3710936C9469B856 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 40.31
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

120.93

**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)  
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) CT Dept Taxation  Mailing Address 25 Sigourney St.  City Hartford State CT Zip Code 06106  Purpose of Disbursement Taxes 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: B9A39E1103C694C40ACD Date of Disbursement 09 / 15 / 2009  Amount of Each Disbursement this Period 40.31
B.	Full Name (Last, First, Middle Initial) IRS  Mailing Address P.O. Box 8530  City Philadelphia State PA Zip Code 19162  Purpose of Disbursement Taxes 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: B526D4784AB4549D0861 Date of Disbursement 07 / 01 / 2009  Amount of Each Disbursement this Period 481.15
C.	Full Name (Last, First, Middle Initial) IRS  Mailing Address P.O. Box 8530  City Philadelphia State PA Zip Code 19162  Purpose of Disbursement Taxes 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: B8450136E331445D5A80 Date of Disbursement 07 / 15 / 2009  Amount of Each Disbursement this Period 456.95

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

978.41

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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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)  
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes 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: B15AAF57FEB0E4EFCA59 Date of Disbursement 08 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 365.05
B.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes 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: B8DD5DFD39BD94118A18 Date of Disbursement 08 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 365.03
C.	Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> City Philadelphia State PA Zip Code 19162 <hr/> Purpose of Disbursement Taxes 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: B37AF2A84A6074BAA9C2 Date of Disbursement 09 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 365.05

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

1095.13

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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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)  
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) IRS Mailing Address P.O. Box 8530 City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes 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: BCD95E2A4B4134BE6911 Date of Disbursement 09 / 15 / 2009 Amount of Each Disbursement this Period 365.05 Category/Type
B.	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 15041 City Worcester State MA Zip Code 01615-0023 Purpose of Disbursement Telephone 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: B8318484782B84EF5B78 Date of Disbursement 07 / 22 / 2009 Amount of Each Disbursement this Period 680.86 Category/Type
C.	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 15041 City Worcester State MA Zip Code 01615-0023 Purpose of Disbursement repayment of debt 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: B410E6FFD979E4A3C8ED Date of Disbursement 07 / 22 / 2009 Amount of Each Disbursement this Period 335.50 Category/Type

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

1381.41

**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)  
Chris Dodd For President Inc

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15041  City Worcester State MA Zip Code 01615-0023  Purpose of Disbursement repayment of debt 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: BE2DED92D60FA4462841 Date of Disbursement 07 / 22 / 2009  Amount of Each Disbursement this Period 896.07
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15041  City Worcester State MA Zip Code 01615-0023  Purpose of Disbursement repayment of debt 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: BE45FCF82DC064D69A87 Date of Disbursement 07 / 22 / 2009  Amount of Each Disbursement this Period 694.96
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15041  City Worcester State MA Zip Code 01615-0023  Purpose of Disbursement repayment of debt 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: B61DB8CB05EF24E4AB12 Date of Disbursement 07 / 22 / 2009  Amount of Each Disbursement this Period 647.11

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

2238.14

**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)  
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15041  City Worcester State MA Zip Code 01615-0023  Purpose of Disbursement repayment of debt 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: B1D6D23EA7AB24A86918 Date of Disbursement 07 / 22 / 2009  Amount of Each Disbursement this Period 320.68
B.	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15041  City Worcester State MA Zip Code 01615-0023  Purpose of Disbursement repayment of debt 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: B39DBAC0AEA634358A78 Date of Disbursement 07 / 22 / 2009  Amount of Each Disbursement this Period 1646.22
C.	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15041  City Worcester State MA Zip Code 01615-0023  Purpose of Disbursement repayment of debt 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: BC9C0F247F58E4613BA2 Date of Disbursement 07 / 22 / 2009  Amount of Each Disbursement this Period 958.74

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

2925.64

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)  
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Kathryn Damato <hr/> Mailing Address 10 Blackhawk Lane <hr/> City West Hartford State CT Zip Code 06117-2903 <hr/> Purpose of Disbursement Salary 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: B2DEBA023A9134A0BB7C Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1074.83
B.	Full Name (Last, First, Middle Initial) Kathryn Damato <hr/> Mailing Address 10 Blackhawk Lane <hr/> City West Hartford State CT Zip Code 06117-2903 <hr/> Purpose of Disbursement Salary 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: B6BA79D5FE9E345B784B Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1074.83
C.	Full Name (Last, First, Middle Initial) Kathryn Damato <hr/> Mailing Address 10 Blackhawk Lane <hr/> City West Hartford State CT Zip Code 06117-2903 <hr/> Purpose of Disbursement Salary 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: B9977B59301EA4807A0E Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1074.83

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

**3224.49**

**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)  
Chris Dodd For President Inc

A.	Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: BA2649BB6524046B48D4
	Mailing Address 10 Blackhawk Lane	Date of Disbursement MM / DD / YYYY 08 / 15 / 2009
	City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period 1074.83
	Purpose of Disbursement Salary 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) Kathryn Damato	Transaction ID: BE9B8D7F7F5B2479596F
	Mailing Address 10 Blackhawk Lane	Date of Disbursement MM / DD / YYYY 09 / 01 / 2009
	City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period 1074.83
	Purpose of Disbursement Salary 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) Kathryn Damato	Transaction ID: B894CECCD2DDC4CC1B3F
	Mailing Address 10 Blackhawk Lane	Date of Disbursement MM / DD / YYYY 09 / 15 / 2009
	City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period 1074.83
	Purpose of Disbursement Salary 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3224.49</b>
<b>TOTAL</b> 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)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Euginia Gluzberg <hr/> Mailing Address 1380 Paradise Avenue <hr/> City Hamden State CT Zip Code 06514-1017 <hr/> Purpose of Disbursement Salary 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) ▼	<b>Transaction ID:</b> BE9A48F52FF74B52884 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 547.78
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Euginia Gluzberg <hr/> Mailing Address 1380 Paradise Avenue <hr/> City Hamden State CT Zip Code 06514-1017 <hr/> Purpose of Disbursement Salary 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) ▼	<b>Transaction ID:</b> BBB41613D3884486E824 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 477.46

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

1025.24

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

17049.54

**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)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 958.74		<b>Transaction ID: D06FE0A4EF1384B299BD</b>	
Amount Incurred This Period 0.00	Payment This Period 958.74	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 335.50		<b>Transaction ID: D079F7773ED3A429F995</b>	
Amount Incurred This Period 0.00	Payment This Period 335.50	Outstanding Balance at Close of This Period 0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 320.68		<b>Transaction ID: DAB48C0D1D9BF48E2819</b>	
Amount Incurred This Period 0.00	Payment This Period 320.68	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 1646.22		<b>Transaction ID: D684E05F5028F4B9FA8C</b>	
Amount Incurred This Period 0.00	Payment This Period 1646.22	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 647.11		<b>Transaction ID: DC05308729895455AAF0</b>	
Amount Incurred This Period 0.00	Payment This Period 647.11	Outstanding Balance at Close of This Period 0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 896.07		<b>Transaction ID: D03866EA927C6487BAA8</b>	
Amount Incurred This Period 0.00	Payment This Period 896.07	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶ 0.00
<b>2) TOTALS</b> This Period (last page this line number only).....	▶
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶
<b>4) ADD 2) and 3)</b> 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)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 15041			
City Worcester	State MA	ZIP Code 01615-0023	

Outstanding Balance Beginning This Period 694.96		<b>Transaction ID: D7AA2635D35294D99959</b>	
Amount Incurred This Period 0.00	Payment This Period 694.96	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> REMAX Results Realty			Nature of Debt (Purpose): Rent and Utilities
Mailing Address 202 1st NW			
City Mason City	State IA	ZIP Code 50401	

Outstanding Balance Beginning This Period 1036.46		<b>Transaction ID: D14F42980C9EF465D8A0</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1036.46	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Qwest			Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154			
City Seattle	State WA	ZIP Code 98111	

Outstanding Balance Beginning This Period 669.82		<b>Transaction ID: D6224518C358E4E34936</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 669.82	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	1706.28
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 657.85	<b>Transaction ID: D160BB52601F3469FBFA</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 657.85

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 471.50	<b>Transaction ID: DE70EBFB35F4E4F5BBA8</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 471.50

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 58.58	<b>Transaction ID: DC07FD8583E3F4BA58CA</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 58.58

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>1187.93</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 418.15	<b>Transaction ID: DA397374A80A8418D9FD</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 418.15

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 575.42	<b>Transaction ID: DA3182C7E844C4F039CE</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 575.42

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period 431.46	<b>Transaction ID: D703363A20B0E44A7A6C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 431.46

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>1425.03</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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 23 / 38  
 FOR LINE NUMBER: (check only one)  11  12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="106.73"/>	<b>Transaction ID:</b> DE2EA2BD913EF4C59A0F
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="106.73"/>

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Qwest	Nature of Debt (Purpose): Telephone
Mailing Address Business Services PO Box 91154	
City State ZIP Code Seattle WA 98111	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="622.51"/>	<b>Transaction ID:</b> DA75CCBF704CB4716B86
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="622.51"/>

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Des Moines Theatrical Shop	Nature of Debt (Purpose): Costume Rental
Mailing Address 145 5th Street	
City State ZIP Code West Des Moines IA 50265	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="106.00"/>	<b>Transaction ID:</b> D7952AAF64B9C4F0997B
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="106.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="835.24"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line) PAGE 24 / 38  
 FOR LINE NUMBER: (check only one)  11  12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Cox Communications	Nature of Debt (Purpose): Internet Services
Mailing Address PO Box 6059	
City State ZIP Code Cypress CA 90630	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="138.02"/>	<b>Transaction ID:</b> DEAECEB41D358C496EAEB
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="138.02"/>

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verham News	Nature of Debt (Purpose): Rent
Mailing Address P.O. Box 706	
City State ZIP Code White Riv Jct VT 05001-0706	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="910.28"/>	<b>Transaction ID:</b> DE2E3D979014F4B2194A
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="910.28"/>

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> U.S. Express Inc.	Nature of Debt (Purpose): Courier Services
Mailing Address 3240 Hubbard Road	
City State ZIP Code Landover MD 20785	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="160.24"/>	<b>Transaction ID:</b> D80871DA60A7642ADAA1
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="160.24"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1208.54"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 25 / 38	
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/>	11
	<input checked="" type="checkbox"/>	12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Old Town Family Restaurant	Nature of Debt (Purpose): Food & Beverage
Mailing Address 2107 Camanche Avenue	
City State ZIP Code Clinton IA 52732-6036	

Outstanding Balance Beginning This Period 130.00	<b>Transaction ID:</b> D8B59DA12044449C0AE9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor COVAD	Nature of Debt (Purpose): Internet Services
Mailing Address Dept. 33408 PO BOX 39000	
City State ZIP Code San Francisco CA 94139	

Outstanding Balance Beginning This Period 1535.76	<b>Transaction ID:</b> D5E78BD6138D849C8A7B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1535.76

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor COVAD	Nature of Debt (Purpose): Internet Services
Mailing Address Dept. 33408 PO BOX 39000	
City State ZIP Code San Francisco CA 94139	

Outstanding Balance Beginning This Period 1056.76	<b>Transaction ID:</b> D7FB209F7C488450BA73	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1056.76

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2722.52
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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)

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 12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Home Front Communications			Nature of Debt (Purpose): Video
Mailing Address 1121 14th Street NW			
City Washington	State DC	ZIP Code 20005-5641	

Outstanding Balance Beginning This Period 6000.00		<b>Transaction ID: D9C275736AC4E46B69DC</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660720			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period 22.28		<b>Transaction ID: DF9E84213BC0C4FA4959</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.28	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Jim VanDusseldorp			Nature of Debt (Purpose): Bus Servicing
Mailing Address 2406 15th Ave. N.			
City Clear Lake	State IA	ZIP Code 50428-2037	

Outstanding Balance Beginning This Period 92.50		<b>Transaction ID: DECE5259C4BB240ADBB7</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 92.50	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	6114.78
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	[ ]
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	[ ]
<b>4) ADD 2) and 3)</b> 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)

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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> VFW Post 775			Nature of Debt (Purpose): Space Rental
Mailing Address 702 West Main Street			
City Ottumwa	State IA	ZIP Code 52501-2226	

Outstanding Balance Beginning This Period <input type="text" value="150.00"/>		<b>Transaction ID: D9F4487EF4F6F4DB6923</b>	
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="150.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Kilkenney's			Nature of Debt (Purpose): Food & Beverage
Mailing Address 300 West 3rd Street			
City Davenport	State IA	ZIP Code 52801-1208	

Outstanding Balance Beginning This Period <input type="text" value="220.00"/>		<b>Transaction ID: DE9F171102B294984BCD</b>	
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="220.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Comcast			Nature of Debt (Purpose): Cable & Internet
Mailing Address PO Box 1577			
City Newark	State NJ	ZIP Code 07101	

Outstanding Balance Beginning This Period <input type="text" value="351.30"/>		<b>Transaction ID: D3A3A16E658A34B44B21</b>	
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="351.30"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	<input type="text" value="721.30"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)

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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan	Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue	
City Waltham State MA ZIP Code 02451	

Outstanding Balance Beginning This Period 239.04	<b>Transaction ID: DD0258CA80C884AB6960</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 239.04

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Keyspan	Nature of Debt (Purpose): Utilities
Mailing Address 52 Second Avenue	
City Waltham State MA ZIP Code 02451	

Outstanding Balance Beginning This Period 1481.16	<b>Transaction ID: DDFA00C779CF445C8AA6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1481.16

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor MoreSound Company	Nature of Debt (Purpose): Sound Equipment
Mailing Address 102 North Street	
City Jaffrey State NH ZIP Code 03452-5301	

Outstanding Balance Beginning This Period 400.00	<b>Transaction ID: D4310E2A2AC3D49AFB1C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>2120.20</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast	Nature of Debt (Purpose): Cable Service
Mailing Address P.O. Box 3005	
City Southeastern State PA ZIP Code 19398-3005	

Outstanding Balance Beginning This Period 197.56	<b>Transaction ID:</b> D1327435AF7974016BBD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 197.56

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Geoff Luxenberg	Nature of Debt (Purpose): Reimbursement for gas & signatures
Mailing Address 249A New State Road	
City Manchester State CT ZIP Code 06042-7959	

Outstanding Balance Beginning This Period 107.00	<b>Transaction ID:</b> D8E19BDBD0BE84CDFB6C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 107.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor WHO Newsradio 1040	Nature of Debt (Purpose): Recording Services
Mailing Address 2141 Grand Avenue	
City Des Moines State IA ZIP Code 50312	

Outstanding Balance Beginning This Period 400.00	<b>Transaction ID:</b> D5CA66406DA5143F7848	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>704.56</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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 30 / 38  
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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Free Media, Inc.	Nature of Debt (Purpose): Reimbursement for Phone Expenses
Mailing Address 777 West End Avenue #5C	
City State ZIP Code New York NY 10025	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="150.09"/>	<b>Transaction ID:</b> D142C4EE26CC3459DA22
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="150.09"/>

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> The Telegraph	Nature of Debt (Purpose): Subscription
Mailing Address PO Box 1008	
City State ZIP Code Nashua NH 03061	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="20.81"/>	<b>Transaction ID:</b> D1D76CBB4EBC7498F81D
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="20.81"/>

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Interstate Power and Light Co.	Nature of Debt (Purpose): Utilities
Mailing Address PO Box 5007	
City State ZIP Code Dubuque IA 52004-5007	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="250.36"/>	<b>Transaction ID:</b> DF8C3EA191F814F5C94C
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="250.36"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="421.26"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 31 / 38	
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/>	11
	<input checked="" type="checkbox"/>	12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Newman and Leventhal Caterers, Inc.	Nature of Debt (Purpose): Caterer
Mailing Address 45 West 81st Street	
City State ZIP Code New York NY 10024-6025	

Outstanding Balance Beginning This Period 2136.07	<b>Transaction ID:</b> D2FDEA7A6FB3F461FA7F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2136.07

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq	Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660068	
City State ZIP Code Dallas TX 75266	

Outstanding Balance Beginning This Period 1064.16	<b>Transaction ID:</b> DBF0B293CD60A40ED8E0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1064.16

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Embarq	Nature of Debt (Purpose): Telephone
Mailing Address PO Box 660068	
City State ZIP Code Dallas TX 75266	

Outstanding Balance Beginning This Period 378.82	<b>Transaction ID:</b> DF4A4422265684FB29B9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 378.82

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	3579.05
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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)

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 12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period <input type="text" value="153.03"/>		<b>Transaction ID:</b> D40B8D89E3ABE4545B3C	
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="153.03"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period <input type="text" value="364.55"/>		<b>Transaction ID:</b> DC3EE07A89ADF414596B	
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="364.55"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period <input type="text" value="561.93"/>		<b>Transaction ID:</b> DA1C685B9BFAF4CD7A76	
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="561.93"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1079.51"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

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 12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon			Nature of Debt (Purpose): Monthly Phone Charges
Mailing Address 8808 Irvine Center Drive			
City Irvine	State CA	ZIP Code 92618-4201	

Outstanding Balance Beginning This Period 660.55		<b>Transaction ID:</b> D0F58D7FEFA5B4E43939	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 660.55	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Big Ten Rentals, Inc.			Nature of Debt (Purpose): Bases
Mailing Address 1820 Boyrum St			
City Iowa City	State IA	ZIP Code 52240-4555	

Outstanding Balance Beginning This Period 34.82		<b>Transaction ID:</b> D9CE80039AE0F470B870	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 34.82	

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Waste Management			Nature of Debt (Purpose): Utilities
Mailing Address PO Box 756			
City Des Moines	State IA	ZIP Code 50303	

Outstanding Balance Beginning This Period 266.02		<b>Transaction ID:</b> D13EE948ED74B4BE0B66	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 266.02	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	961.39
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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)

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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Storefront Political Media			Nature of Debt (Purpose): Photographer
Mailing Address 250 Sutter Street, Suite 650			
City San Francisco	State CA	ZIP Code 94108	

Outstanding Balance Beginning This Period 537.08		<b>Transaction ID: DDB39DC1EDB03445B8B5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 537.08	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mediacom			Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 5744			
City Carol Stream	State IL	ZIP Code 60197-5744	

Outstanding Balance Beginning This Period 19.14		<b>Transaction ID: DBAEE80A9C8F14CBF964</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.14	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mediacom			Nature of Debt (Purpose): Cable
Mailing Address P.O. Box 5744			
City Carol Stream	State IL	ZIP Code 60197-5744	

Outstanding Balance Beginning This Period 92.37		<b>Transaction ID: D34D4235A01F441BAA58</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 92.37	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	648.59
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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)

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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Heartland Flagpoles and Flags	Nature of Debt (Purpose): Flags
Mailing Address 3719 SW 9th Street	
City State ZIP Code Des Moines IA 50315	

Outstanding Balance Beginning This Period 436.60	<b>Transaction ID:</b> D42D026888D4F47D198F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 436.60

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Grand Colony	Nature of Debt (Purpose): Lodging
Mailing Address 2824 Grand Avenue, #218	
City State ZIP Code Des Moines IA 50312	

Outstanding Balance Beginning This Period 153.50	<b>Transaction ID:</b> D232577C9B94046BB9A9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 153.50

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor IAFF FIREPAC	Nature of Debt (Purpose): Rental & Bus Wrap
Mailing Address Attn: David B. Billy 1750 New York Ave, NW	
City State ZIP Code Washington DC 20006-5305	

Outstanding Balance Beginning This Period 32233.24	<b>Transaction ID:</b> DE8437A16695047AC84E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32233.24

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>32823.34</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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)

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NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 10000.00	<b>Transaction ID: D76E8E67033CC4385B66</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 8110	
City State ZIP Code Aurora IL 60572	

Outstanding Balance Beginning This Period 312.07	<b>Transaction ID: DD365AF099EC8458EBE5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 312.07

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Consulting Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 12218.23	<b>Transaction ID: D009B107509464ACF93C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12218.23

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>22530.30</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Consulting Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 12151.74	<b>Transaction ID:</b> D7001504DB52642CE816	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12151.74

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Consulting Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 12046.59	<b>Transaction ID:</b> DEE6A4D77FA7A412F956	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12046.59

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Consulting Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period 11927.67	<b>Transaction ID:</b> D4AB38D1C46384341B16	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11927.67

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	36126.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 38 / 38	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)  
 Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Consulting Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input type="text" value="11823.58"/>	<b>Transaction ID: DF7FE46652AE4441E811</b>	
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="11823.58"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal Consulting Services
Mailing Address Centralized Accounting Dept. 1201 Third Ave., 40th Floor	
City State ZIP Code Seattle WA 98101-3099	

Outstanding Balance Beginning This Period <input type="text" value="1946.79"/>	<b>Transaction ID: DEA5024F12CD748EFB9B</b>	
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="1946.79"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="13770.37"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text" value="130686.19"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="130686.19"/>