

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

LARSON FOR CONGRESS

ADDRESS (number and street)

PO Box 261172

Check if different  
than previously  
reported. (ACC)

Hartford

CT

06126-1172

2. FEC IDENTIFICATION NUMBER ▼

C

C00330142

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CT

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

01

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

09

D D / Y Y Y Y

30

Y Y Y Y

2014

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 Barry Feldman

Signature of Treasurer

Barry Feldman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

14

Y Y Y Y

2014

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LARSON FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	337087.18	1680639.70
(b) Total Contribution Refunds (from Line 20(d)) .....	2000.00	3450.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	335087.18	1677189.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	179567.82	1051585.15
(b) Total Offsets to Operating Expenditures (from Line 14).....	414.75	7399.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	179153.07	1044185.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	628011.14	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	989.63	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	3662.92	

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**LARSON FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

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

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

87745.00

521839.28

**(ii) Unitemized.....**

14364.82

111552.96

**(iii) TOTAL of contributions from individuals ▶**

102109.82

633392.24

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

0.00

0.00

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

234977.36

1047247.46

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

0.00

0.00

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

337087.18

1680639.70

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

414.75

7399.63

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

308.86

1547.08

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

337810.79

1689586.41

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 242

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	179567.82	1051585.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1450.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2000.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	3450.00
21. OTHER DISBURSEMENTS .....	102115.31	324031.03
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	283683.13	1379066.18

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	573883.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	337810.79
25. SUBTOTAL (add Line 23 and Line 24).....	911694.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	283683.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	628011.14

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

FOR LINE NUMBER:

PAGE 5 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**G. L. Agrawal****A.**

Mailing Address 22 Hampden Circle

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R&amp;D Dynamics Corp.

Occupation

Engineer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2014

**Transaction ID : SA11AI.59826**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**G. L. Agrawal****B.**

Mailing Address 22 Hampden Circle

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R&amp;D Dynamics Corp.

Occupation

Engineer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2014

**Transaction ID : SA11AI.59402**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**Richard L. Alleyne****C.**

Mailing Address 156 South Main Street

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2014

**Transaction ID : SA11AI.59292**

Amount of Each Receipt this Period

500.00

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

2250.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. Ryaz Ansari

Mailing Address 483 W. Middle Tpke.

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rosenlight &amp; Ansari Oral Surge

Occupation

Oral Surgeon

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		22		2014

Transaction ID : SA11AI.59326

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. M. Saud Anwar

Mailing Address 93 Rockledge Drive

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northeastern Pulmonary Associa

Occupation

MD

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		29		2014

Transaction ID : SA11AI.59634

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Kevin F. Armata

Mailing Address 235 Fair Hill Lane

City

Suffield

State

CT

Zip Code

06078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMR

Occupation

CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59902

Amount of Each Receipt this Period

500.00

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

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

1050.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

P. Albert Armstrong

A.

Mailing Address 29 Moseley Terrace

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Armstrong Rockwell

Occupation

Jeweler

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59391

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

Timothy F. Bannon

B.

Mailing Address 57 Arvine Place

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59540

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Stephen J. Barberino Jr.

C.

Mailing Address 1097 Farmington Avenue

City

Bristol

State

CT

Zip Code

06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stephen Automall Center

Occupation

Auto Dealer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		20		2014

Transaction ID : SA11AI.59509

Amount of Each Receipt this Period

500.00

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

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

750.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Frank D. Barrows

A.

Mailing Address 108 Bloomfield Avenue

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2014

Transaction ID : SA11AI.59733

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

John Winslow Beck

B.

Mailing Address 464 South River Road

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Siegel O'Connor

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59707

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Penelope I. Bellamy

C.

Mailing Address 276 Thimble Islands Rd.

City

Stony Creek

State

CT

Zip Code

06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.59701

Amount of Each Receipt this Period

500.00

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

3175.00

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

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

PAGE 9 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Jonathan Ross Bennett**

Mailing Address 130 Silver Creek Drive

City

Suffield

State

CT

Zip Code

06078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

EVP, Personal &amp; Small Bus.

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2014

Transaction ID : SA11AI.59351

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Beth A. Bombara**

Mailing Address 2 Tallwood Lane

City

Simsbury

State

CT

Zip Code

06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

CFO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2014

Transaction ID : SA11AI.59359

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Lewis Bower**

Mailing Address PO Box 506

City

East Berlin

State

CT

Zip Code

06023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Keep Me Home

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2014

Transaction ID : SA11AI.59287

Amount of Each Receipt this Period

250.00

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

1750.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chuck Brain

Mailing Address 316 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capitol Hill Strategies LLC

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2014

Transaction ID : SA11AI.60526

Amount of Each Receipt this Period

500.00

In-kind - Catering

Full Name (Last, First, Middle Initial)

B. William Breetz

Mailing Address 159 North Beacon Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59930

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Kelly O. Britt

Mailing Address 102 Terry Lane

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Atlantic Dermatology Assoc.

Occupation

Certified Physician Assistant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2014

Transaction ID : SA11AI.59399

Amount of Each Receipt this Period

125.00

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

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

1625.00

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

FOR LINE NUMBER:

PAGE 11 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Gregory Brown**

Mailing Address 163 Kingswood Drive

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Executive

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2014

Transaction ID : SA11AI.59022

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Kim Bruno**

Mailing Address 33 Shore Road

City

Waterford

State

CT

Zip Code

06385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Curtin Motor Livery Service

Occupation

Owner/Operator

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2014

Transaction ID : SA11AI.59334

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Richard A. Bruno Jr.**

Mailing Address 33 Shore road

City

Waterford

State

CT

Zip Code

06385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Information requested

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59938

Amount of Each Receipt this Period

500.00

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

1500.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kathleen M. Burr DMD

A.

Mailing Address 119 West Street

City

Hebron

State

CT

Zip Code

06248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Orthodontist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.59589

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Lorraine J. Calabrese

B.

Mailing Address 22 Watson Farm

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.59501

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Lorraine J. Calabrese

C.

Mailing Address 22 Watson Farm

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2014

Transaction ID : SA11AI.59678

Amount of Each Receipt this Period

35.00

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

310.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. John P. Cantillon

Mailing Address N Main Street

City

Southington

State

CT

Zip Code

06489

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pratt &amp; Whitney

Occupation

VP Controller

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59332

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Kenneth Capano

Mailing Address 6 Trails End

City

Old Saybrook

State

CT

Zip Code

06475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Retail food market

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.59375

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Steven C. Casey

Mailing Address 83 Peach Tree LN

City

Bristol

State

CT

Zip Code

06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Connecticut

Occupation

IS Administrator

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.59062

Amount of Each Receipt this Period

100.00

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

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

1135.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andre K. Charbonneau**

Mailing Address 10 Abbe Road

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Contractor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1825.00

Date of Receipt

M M / D D / Y Y Y Y  
08 18 2014

Transaction ID : SA11AI.59495

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**Patricia J. Christiana**

Mailing Address 114 Steep Hollow Lane

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 12 2014

Transaction ID : SA11AI.59728

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Sally T. Collins**

Mailing Address 67 Blue Ridge Lane

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Midstate Construction, LLC

Occupation

Reat Estate

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
09 12 2014

Transaction ID : SA11AI.59706

Amount of Each Receipt this Period

2600.00

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

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

2850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**William Collins****A.**

Mailing Address 67 Blue Ridge Lane

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

William Collins Real Estate

Occupation

Developer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

**Transaction ID : SA11AI.59705**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Michael Concannon****B.**

Mailing Address 32 Manzoni Farm Dr.

City

Madison

State

CT

Zip Code

06443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

SVP Personal Lines

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

**Transaction ID : SA11AI.59030**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Susan B. Coogan****C.**

Mailing Address 69 Bayberry Lane

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2014

**Transaction ID : SA11AI.59679**

Amount of Each Receipt this Period

50.00

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

3150.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Neal F. Cunningham

Mailing Address 61 Pershing Road

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BES-CUT, Inc.

Occupation

Systems Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

785.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60425

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. James E. Davey

Mailing Address 18 School House Lane

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Financial Services

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2014

Transaction ID : SA11AI.59817

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Robert M. DeCrescenzo

Mailing Address 401 High Street

City

East Hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Updike, Kelly &amp; Spellacy, P.C.

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59712

Amount of Each Receipt this Period

25.00

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

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

535.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Daniel DeMastro

A.

Mailing Address P.O. Box 151

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Aero-Med, LTD

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		07		2014

Transaction ID : SA11AI.59799

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Timothy J. Devanney

B.

Mailing Address 70 Porter Street

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Highland Park Market

Occupation

Grocer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59376

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Edward Diamond

C.

Mailing Address 30 Beelzebub Road

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Russell &amp; Dawson LLC

Occupation

Sr. Project Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.59680

Amount of Each Receipt this Period

500.00

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

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

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Nancy J. Dinardo**

Mailing Address 61 Suzanne Cir.

City

Trumbull

State

CT

Zip Code

06611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2014

Transaction ID : SA11AI.59408

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. DREW PAC**

Mailing Address 77 Prout Hill Road

City

Middletown

State

CT

Zip Code

06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2014

Transaction ID : SA11AI.59823

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. Eileen P. Driscoll**

Mailing Address 672 Forest Street

City

East Hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Town of East Hartford

Occupation

Asst. Registrar of Vital Statistics

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59717

Amount of Each Receipt this Period

25.00

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

925.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael Dzen Jr.

Mailing Address 37 S Main Street

City

East Windsor

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dzen Commercial Roofing LLC

Occupation

Business Owner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.59492

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Lester Eber

Mailing Address 15 Coral Way

City

Rochester

State

NY

Zip Code

14618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Slown &amp; Sons

Occupation

Wholesale Wine &amp; Liquor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.59604

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Douglas G. Elliot

Mailing Address 24 Hunters Ridge

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Steam Boiler Insp.

Occupation

President &amp; CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		18		2014

Transaction ID : SA11AI.59850

Amount of Each Receipt this Period

1000.00

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

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

2100.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**James J. Fallon**

**A.**

Mailing Address 8 Virginia Drive

City

Ellington

State

CT

Zip Code

06029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.60592**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**David Fay**

**B.**

Mailing Address 166 Capitol Avenue

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Bushnell

Occupation

CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

950.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2014

**Transaction ID : SA11AI.59420**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**Lynn Ferrari**

**C.**

Mailing Address 33 Charter Oak Place

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

510.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 12 / 2014

**Transaction ID : SA11AI.59729**

Amount of Each Receipt this Period

300.00

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

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

675.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Donna M. Fiorentino**

**A.**

Mailing Address 42 Montclair Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 12 / 2014

**Transaction ID : SA11AI.59709**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Timothy J. Fitzgerald**

**B.**

Mailing Address 1124 Windsor Avenue

City

Windsor

State

CT

Zip Code

06095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dwyer, Sheridan and Fitzgerald

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.60515**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Ellen M. Flanagan**

**C.**

Mailing Address 20 Arnoldale Road

City

West Hartford

State

CT

Zip Code

06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Women's Instit. for Housing

Occupation

Real estate developer

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.60584**

Amount of Each Receipt this Period

500.00

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

650.00

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

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

FOR LINE NUMBER:

PAGE 22 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lawrence Fox**

Mailing Address 60 Mountain View Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59907

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Richard A. Fracasso**

Mailing Address 193 Dayl Drive

City

Kensington

State

CT

Zip Code

06037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

765.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : SA11AI.59925

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Cynthia A. Francis**

Mailing Address 464 South River Road

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

none

Occupation

homemaker

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59708

Amount of Each Receipt this Period

2600.00

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

2750.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Elizabeth K. Fumiatti

A.

Mailing Address 691 Camp Street

City

Bristol

State

CT

Zip Code

06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59931

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Amy Gallent

B.

Mailing Address 16 Country Lane

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.59033

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Thomas Galvin DDS

C.

Mailing Address 246 Mountain Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Dentist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		18		2014

Transaction ID : SA11AI.59852

Amount of Each Receipt this Period

125.00

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

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

475.00

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

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

FOR LINE NUMBER:

PAGE 24 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Thomas Galvin DDS

A.

Mailing Address 246 Mountain Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Dentist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2014

Transaction ID : SA11AI.59918

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

Timothy J. Gamache

B.

Mailing Address 79 Cypress Street

City

Bristol

State

CT

Zip Code

06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.59793

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

Jeffrey A. Gebrian

C.

Mailing Address 60 Sunrise Hill Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CR3 Inc.

Occupation

Landscaping

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2014

Transaction ID : SA11AI.59926

Amount of Each Receipt this Period

50.00

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

250.00

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

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

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

FOR LINE NUMBER:

PAGE 25 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

GENERAL MOTORS CORPORATION POLITICAL ACTION COMMITTEE (GM PAC)

A.

Mailing Address 25 Massachusetts Avenue NW  
Suite 400

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing  
federal political committee.

C C00076810

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59914

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Martha Gervasi

B.

Mailing Address 63 Foxcroft Road

City	State	Zip Code
West Hartford	CT	06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

The Hartford

Human resources

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Transaction ID : SA11AI.59364

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Kevin P. Graff

C.

Mailing Address 28 Evergreen Lane

City	State	Zip Code
Glastonbury	CT	06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-employed

Lobbyist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		14		2014

Transaction ID : SA11AI.59343

Amount of Each Receipt this Period

150.00

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

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

1400.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Kevin P. Graff**

Mailing Address 28 Evergreen Lane

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59546

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**James M. Griffin Jr.**

Mailing Address 259 Duncaster Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Economist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59552

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Laura Haines**

Mailing Address 115 Stewart Avenue

City

Alexandria

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Government relations

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2014

Transaction ID : SA11AI.59344

Amount of Each Receipt this Period

250.00

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

800.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kathleen P. Hancock

A.

Mailing Address 189 Mile Creek Road

City

Old Lyme

State

CT

Zip Code

06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Regional District #18

Occupation

Teacher

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2014

Transaction ID : SA11AI.59825

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Jerry Harnik

B.

Mailing Address 9 Walnut Hollow Lane

City

Lincroft

State

NJ

Zip Code

07738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

General Agent

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2014

Transaction ID : SA11AI.59289

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Edward F. Havens

C.

Mailing Address 25 Imperial Drive

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Imperial Oil &amp; Plumbing

Occupation

Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.59697

Amount of Each Receipt this Period

250.00

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

2650.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

James Heavner

A.

Mailing Address 21 Aspenwood Drive

City

Weatogue

State

CT

Zip Code

06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2014

Transaction ID : SA11AI.59297

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mary M. Heslin

B.

Mailing Address 235 Kenyon Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60432

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

Mary M. Heslin

C.

Mailing Address 235 Kenyon Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.59682

Amount of Each Receipt this Period

50.00

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

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

610.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marcia Hickey

Mailing Address 6 Brookview Circle

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hebrew Healthcare, Inc.Occupation  
Executive

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2014

Transaction ID : SA11AI.59807

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kevin A. Hill

Mailing Address 185 Garden Street

City

wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Levin, Powers & Brennan, LLCOccupation  
Lobbyist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2014

Transaction ID : SA11AI.59828

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Paul B. Hoar

Mailing Address 73 Dayton Road

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AgriFuels, LLCOccupation  
President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60436

Amount of Each Receipt this Period

10.00

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

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

360.00

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Paul B. Hoar****A.**

Mailing Address 73 Dayton Road

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AgriFuels, LLC

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

695.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

**Transaction ID : SA11AI.59383**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**Rosemary J. Hogan****B.**

Mailing Address 61 Pershing Road

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Travelers

Occupation

Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

**Transaction ID : SA11AI.60426**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**Ross H. Hollander****C.**

Mailing Address 3 High Ledge Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Distributors

Occupation

Executive

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2014

**Transaction ID : SA11AI.59800**

Amount of Each Receipt this Period

1500.00

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

1545.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Lindsay D. Hooper

A.

Mailing Address 3733 N. Tazewell Street

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2014

Transaction ID : SA11AI.59869

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Michael E. Hotaling

B.

Mailing Address 20 Cedar Hill Road

City

West Simsbury

State

CT

Zip Code

06092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The HartfordOccupation  
SVP - Large Loss

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.59045

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dorothy Hunt

C.

Mailing Address 205 Wintonbury Avenue

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information requestedOccupation  
Information requested

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.60590

Amount of Each Receipt this Period

100.00

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

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

1600.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael Jackson

A.

Mailing Address 177 Sabbaday Lane

City

Washington Depot

State

CT

Zip Code

06794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ironwod Partners

Occupation

Investor/psychoanalyst

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.59365

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Brion S. Johnson

B.

Mailing Address 6 Francis Way

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Investment Management

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2014

Transaction ID : SA11AI.59296

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Bruce V. Johnson

C.

Mailing Address 59 Cheney Lane

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Engineer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59906

Amount of Each Receipt this Period

200.00

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

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

1700.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Elliot T. Joseph

Mailing Address 3 Sunningdale

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Hospital

Occupation

Chief Executive Officer &amp; CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59932

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Raquel N. Kennedy

Mailing Address 139 Hazelmere Road

City

New Britain

State

CT

Zip Code

06053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Victory Energy Solutions

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60441

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Matthew Kirk

Mailing Address 57 Sturgeon River Rd.

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford Financial Service

Occupation

Vice President, Government Affairs

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.59044

Amount of Each Receipt this Period

500.00

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

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

1010.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marie Kirkley-Bey**

Mailing Address 39 Ashley Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of ConnecticutOccupation  
State Legislator

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.60583**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Paul A. Klager**

Mailing Address 11 David Drive

City

East Windsor

State

CT

Zip Code

06088

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bacon & Wilson, P.C.Occupation  
Administrator

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

**Transaction ID : SA11AI.59542**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Paul A. Klager**

Mailing Address 11 David Drive

City

East Windsor

State

CT

Zip Code

06088

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bacon & Wilson, P.C.Occupation  
Administrator

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.59369**

Amount of Each Receipt this Period

25.00

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

200.00

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

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Alan J. Kreczko</b>			Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2014		
Mailing Address 5 Spruce Lane			<b>Transaction ID : SA11AI.59362</b>		
City	State	Zip Code	Amount of Each Receipt this Period 1000.00		
Weatogue	CT	06089			
FEC ID number of contributing federal political committee.		C			
Name of Employer The Hartford		Occupation Attorney			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Vincent N. LaPorta D.M.D.</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014		
Mailing Address 201 Auburn Road			<b>Transaction ID : SA11AI.59569</b>		
City	State	Zip Code	Amount of Each Receipt this Period 250.00		
West Hartford	CT	06119			
FEC ID number of contributing federal political committee.		C			
Name of Employer Shoreline Periodontics		Occupation Dentist			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>John C. Larkin</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014		
Mailing Address 18 Grist Mill Road			<b>Transaction ID : SA11AI.59716</b>		
City	State	Zip Code	Amount of Each Receipt this Period 250.00		
Glastonbury	CT	06033			
FEC ID number of contributing federal political committee.		C			
Name of Employer J L Larkin Company		Occupation Lobbyist/Consultant			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1500.00		
<b>TOTAL</b> This Period (last page this line number only).....					

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Clifford G. Leach**

**A.**

Mailing Address 999 Prospect Avenue

City

West Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Government Affairs

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.59847**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Jay Levin**

**B.**

Mailing Address 40 Hungerford Street

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Levin, Powers, Brennan & Shea LLC

Occupation

Government Relations

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 12 / 2014

**Transaction ID : SA11AI.59822**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Scott Lewis**

**C.**

Mailing Address 32 Foxcroft Run

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Finance Executive

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 07 / 2014

**Transaction ID : SA11AI.59025**

Amount of Each Receipt this Period

300.00

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

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

1050.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew J. Littlefair**

Mailing Address 110 Via Trieste

City

Newport Beach

State

CA

Zip Code

92663

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clean Energy

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.59752

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Jerry W. Long**

Mailing Address 17 Avery Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PCC Technology Group

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59401

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**Michael T. Long**

Mailing Address 8 Erin's Way

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2014

Transaction ID : SA11AI.59415

Amount of Each Receipt this Period

25.00

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

2750.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

740.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60427

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

790.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59720

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Michael B. Lynch

Mailing Address 71 Masters Way

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.59699

Amount of Each Receipt this Period

250.00

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

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

320.00

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

William A. MacDonnell DDS

A.

Mailing Address 158 Hunter Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Dentist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.59586

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Douglas H. MacGilpin

B.

Mailing Address 11 Worcester Street

City

Boston

State

MA

Zip Code

02118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Dentist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.59584

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Carolyn J. Malon

C.

Mailing Address 11 Mountain Terrace

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Dentist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.59588

Amount of Each Receipt this Period

250.00

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

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

750.00

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

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Bruce A. Maneeley

Mailing Address 65 Rye Street

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Maneeley's Banquet Facility

Occupation

Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.60591

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Frank Manganaro

Mailing Address 135 Cambridge Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Mgmt./Tech. consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60440

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Frank Manganaro

Mailing Address 135 Cambridge Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Mgmt./Tech. consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2014

Transaction ID : SA11AI.59421

Amount of Each Receipt this Period

75.00

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

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

1585.00

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Dean Marchessault</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 17 Oxford Court		<b>Transaction ID : SA11AI.59461</b>	
City Simsbury	State CT	Zip Code 06070	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer American Eagle Federal Credit	Occupation Financial Advisor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Artan Martinaj</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 375 Goodwin Street		<b>Transaction ID : SA11AI.59734</b>	
City East Hartford	State CT	Zip Code 06108	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT Transit	Occupation Bus Driver		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 320.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Jamshid Marvasti</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2014	
Mailing Address 63 E. Center Street		<b>Transaction ID : SA11AI.59806</b>	
City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		550.00	
<b>TOTAL</b> This Period (last page this line number only).....			

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Patience McDowell

A.

Mailing Address 45 Woodside Circle

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59550

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Patricia McEvoy

B.

Mailing Address 49 Smallwood Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Compliance Officer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		09		2014

Transaction ID : SA11AI.59354

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Lauchlin H. McLean

C.

Mailing Address 93 Pioneer Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		07		2014

Transaction ID : SA11AI.59802

Amount of Each Receipt this Period

100.00

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

400.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Lauchlin H. McLean

Mailing Address 93 Pioneer Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

Transaction ID : SA11AI.59782

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. David J. McQuade

Mailing Address 20-13 Whitney Ferguson Road

City

Vernon

State

CT

Zip Code

06066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Murtha Cullina LLP

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59551

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Carl A. Merz

Mailing Address 64 Balfour Drive

City

West Hartford

State

CO

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Aviation Group, Inc.

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SA11AI.59893

Amount of Each Receipt this Period

200.00

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

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

800.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Joseph M. Mikrut

Mailing Address 12809 Wycklow Drive

City

Clifton

State

VA

Zip Code

20124

FEC ID number of contributing federal political committee.

C

Name of Employer  
Capitol Tax PartnersOccupation  
Partner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2014

Transaction ID : SA11AI.59870

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bennett Millstein

Mailing Address 46 Cliffmount Drive

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59900

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Joseph S. Mioli

Mailing Address 42 Southport Woods Drive

City

Southport

State

CT

Zip Code

06890

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.59504

Amount of Each Receipt this Period

250.00

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

1350.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John J. Mitchell

A.

Mailing Address 40 Windy Hill Drive

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mitchell Fuel

Occupation

Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		29		2014

Transaction ID : SA11AI.59631

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Daniel J. Moore

B.

Mailing Address 57 Hebron Road

City

Marlborough

State

CT

Zip Code

06447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northeast Utilities

Occupation

Manager, Government Affairs

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59555

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

David Moore

C.

Mailing Address 24 East Main Street

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Smith &amp; Moore, LLC

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

Transaction ID : SA11AI.59405

Amount of Each Receipt this Period

250.00

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

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

600.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kevin F. Morgan

A.

Mailing Address 54 Split Oak Circle

City

Chesterfield

State

NH

Zip Code

03443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GeoVisions

Occupation

CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.60510

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Margaret L. Morton

B.

Mailing Address 369 Pine Street

City

Middletown

State

CT

Zip Code

06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northeast Utilities

Occupation

Vice President - Govt. Affairs

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59547

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Frances Moulton

C.

Mailing Address 60 Loeffler Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.59702

Amount of Each Receipt this Period

100.00

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

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

700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Melissa Mueller**

Mailing Address 717 S. Royal Street

City

Alexandria

State

NJ

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Tax PartnersOccupation  
Tax Counsel

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : SA11AI.59871

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Janemarie W. Murphy**

Mailing Address 187 Stoner Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Murtha, Cullina, LLPOccupation  
Government Relations

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59556

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Tuyen D. Nguyen**

Mailing Address 129 South Mill Drive

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Dentist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.59577

Amount of Each Receipt this Period

250.00

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

1000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lucille M. Nickerson****A.**

Mailing Address 70 Uplands Drive

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

**Transaction ID : SA11AI.59935**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mark Niland****B.**

Mailing Address 8 Horseshoe Circle

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Financial Services Gr

Occupation

Portfolio Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

**Transaction ID : SA11AI.59043**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Daniel Nolan****C.**

Mailing Address 26 Whitney Circle

City

Windsor

State

CT

Zip Code

06095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

City of Hartford

Occupation

Firefighter

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.59368**

Amount of Each Receipt this Period

200.00

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

1200.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Mary L. Onidi

Mailing Address 61 Huckleberry Road

City

East hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Marsh USA, Inc.

Occupation

Insurance

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59393

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Neal Ossen

Mailing Address 500 Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ossen &amp; Murphy

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Transaction ID : SA11AI.59809

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kirit Patel

Mailing Address 864 N King Street

City

Northhampton

State

MA

Zip Code

01060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shields Hotel

Occupation

Business

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

Transaction ID : SA11AI.59471

Amount of Each Receipt this Period

250.00

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

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

325.00

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

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

FOR LINE NUMBER:

PAGE 50 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Margaret S. Patricelli**

Mailing Address 77 Hartford Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59940

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Robert E. Patricelli**

Mailing Address 77 Hartford Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing federal political committee.

C

Name of Employer  
Evolution Benefits, Inc.Occupation  
Executive

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.59941

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Judith B. Perkins**

Mailing Address 11 Walbridge Road

City

West Hartford

State

CT

Zip Code

06119

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59379

Amount of Each Receipt this Period

500.00

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

2500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Joseph Pessa

Mailing Address 1 Cozy Court

City

Cromwell

State

CT

Zip Code

06416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dynamic Air Quality SolutionsOccupation  
Engineer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.59696

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. James A. Plumridge

Mailing Address 50 Church Street

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2014

Transaction ID : SA11AI.59333

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. James A. Plumridge

Mailing Address 50 Church Street

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.59394

Amount of Each Receipt this Period

100.00

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

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

250.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mark H. Powers

Mailing Address 4 Round Rock Road

City

Niantic

State

CT

Zip Code

06357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Levin, Powers, Brennan &amp; Shea, LLC

Occupation

Government Relations

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2014

Transaction ID : SA11AI.59805

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Tatricia Dinneen Priebe

Mailing Address 60 Kings Highway

City

North Haven

State

CT

Zip Code

06473

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant/lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59726

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

John E. Rajala

Mailing Address 81 Main Street

City

Broad Brook

State

CT

Zip Code

06016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.60409

Amount of Each Receipt this Period

5.00

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

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

1030.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John E. Rajala

Mailing Address 81 Main Street

City

Broad Brook

State

CT

Zip Code

06016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.60478

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Raymond N. Ramsey

Mailing Address 7 Winterbourne View

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59519

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Anthony W. Ravosa Jr.

Mailing Address 77 Chatham Hill

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Vince Group

Occupation

President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		12		2014

Transaction ID : SA11AI.59821

Amount of Each Receipt this Period

250.00

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

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

325.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. Pamela T. Reid

Mailing Address 27 Buckingham Lane

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Joseph College

Occupation

President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59703

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. John C. Reuber

Mailing Address 126 Tamarac Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sheptoff, Reuber &amp; Company

Occupation

CPA

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.59608

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. John C. Reuber

Mailing Address 126 Tamarac Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sheptoff, Reuber &amp; Company

Occupation

CPA

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2014

Transaction ID : SA11AI.59695

Amount of Each Receipt this Period

200.00

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

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

475.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sali G. Riege**

Mailing Address 80 Loeffler Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2014

Transaction ID : SA11AI.59778

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kevin J. Riordan**

Mailing Address 655 15th Street NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wellpoint

Occupation

Regional Vice President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2014

Transaction ID : SA11AI.59689

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Albert Rizzo Jr.**

Mailing Address 388 Stamm Road

City

Newington

State

CT

Zip Code

06111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rizzo Pool

Occupation

Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2014

Transaction ID : SA11AI.59363

Amount of Each Receipt this Period

400.00

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

1500.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. David C. Robinson

Mailing Address 21 Ledyard Road

City

West hartford

State

CT

Zip Code

06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.59034

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Patricia E. Rodgers

Mailing Address 1909 Main Street

City

East Hartford

State

CT

Zip Code

06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Murtha Cullina LLP

Occupation

Paralegal

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.59545

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Jay E. Rosenblum

Mailing Address 7719 Maryknoll Avenue

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Financial Services Gr

Occupation

Lawyer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2014

Transaction ID : SA11AI.59358

Amount of Each Receipt this Period

1000.00

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

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

1700.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Barbara-Ann Rossi

Mailing Address 21 Jerry Road

City

East Hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59704

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

, Robert Rupp

Mailing Address 3 Candlewood Lane

City

Darien

State

CT

Zip Code

06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

EVP &amp; Chief Risk Officer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2014

Transaction ID : SA11AI.59360

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Dan Lyman Russell

Mailing Address 118 Oak Street

City

East Hartford

State

CT

Zip Code

06118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Russell &amp; Dawson LLC

Occupation

Architect

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.59603

Amount of Each Receipt this Period

250.00

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

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

1300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Peter Sannizzaro**

Mailing Address 18 Fawn Drive

City

Granby

State

CT

Zip Code

06035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

S.V.P. Finance

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2014

Transaction ID : SA11AI.59352

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Robert Santangelo**

Mailing Address 11 Prospect Street

City

Middletown

State

CT

Zip Code

06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CMHAS

Occupation

Counselor

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2014

Transaction ID : SA11AI.59827

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Daniel R. Saunders**

Mailing Address 43 Blue ridge Mountain Drive

City

Somers

State

CT

Zip Code

06071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Prindivile, Peracchio and Saun

Occupation

Oral &amp; Max. Surgeon

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2014

Transaction ID : SA11AI.59327

Amount of Each Receipt this Period

250.00

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

1000.00

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

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Anita Schepker**

Mailing Address 115 Mountain Terrace Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2625.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 12 / 2014

Transaction ID : SA11AI.59725

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**Sydney T. Schulman**

Mailing Address 8 Ledge Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Schulman and Associates

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 27 / 2014

Transaction ID : SA11AI.59973

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Richard Schwab**

Mailing Address 85 Willowbrook Road

City

Storrs

State

CT

Zip Code

06268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Neag School of Education

Occupation

Educator

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2014

Transaction ID : SA11AI.59470

Amount of Each Receipt this Period

250.00

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

475.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Matthew Scott**

Mailing Address 69 Sunset Farm Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hartford

Occupation

SVP Claims

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2014

Transaction ID : SA11AI.59349

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Robert M. Shanbaum**

Mailing Address 99 Hartford Road

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ocuco Inc.

Occupation

Software Developer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59710

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**David Silberstein**

Mailing Address 1078 East 27th Street

City

Brooklyn

State

NY

Zip Code

11210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Resl estate investments

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2014

Transaction ID : SA11AI.59843

Amount of Each Receipt this Period

2000.00

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

2550.00

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

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

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

FOR LINE NUMBER:

PAGE 61 OF 242

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Eli Silberstein**

A.

Mailing Address 1235 East 13th Street

City

Brooklyn

State

NY

Zip Code

11230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coal Capital HoldingsOccupation  
Accountant

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2014

Transaction ID : SA11AI.59841

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Joseph Silberstein**

B.

Mailing Address 53 North Crest Place

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coal Capital HoldingsOccupation  
Legal Department

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2014

Transaction ID : SA11AI.59839

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Raymond J. Sprague**

C.

Mailing Address 108 Pinehill Road

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Financial Services GroupOccupation  
Manager

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2014

Transaction ID : SA11AI.59293

Amount of Each Receipt this Period

500.00

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

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

3500.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Carla Squatrito</b>			Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2014		
Mailing Address 50 Talbot Lane			<b>Transaction ID : SA11AI.59854</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
South Windsor	CT	06042	1250.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer Carla's Pasta, Inc.		Occupation President	3600.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	3600.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Shirley W. Steinmetz</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2014		
Mailing Address 375 Brimfield Road			<b>Transaction ID : SA11AI.60448</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
Wethersfield	CT	06109	5.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer None		Occupation None	330.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	330.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Shirley W. Steinmetz</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 375 Brimfield Road			<b>Transaction ID : SA11AI.59423</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
Wethersfield	CT	06109	10.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer None		Occupation None	340.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	340.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1265.00		
<b>TOTAL</b> This Period (last page this line number only).....			1265.00		

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59797</b>	
City Cheshire	State CT	Zip Code 06410	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Name of Employer Self-employed		
Occupation Business Owner		Election Cycle-to-Date 700.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59468</b>	
City Cheshire	State CT	Zip Code 06410	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Name of Employer Self-employed		
Occupation Business Owner		Election Cycle-to-Date 800.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59469</b>	
City Cheshire	State CT	Zip Code 06410	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Name of Employer Self-employed		
Occupation Business Owner		Election Cycle-to-Date 900.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
<b>SUBTOTAL</b> of Receipts This Page (optional).....			300.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert Stern

A.

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		14		2014

Transaction ID : SA11AI.59607

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Robert Stern

B.

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		20		2014

Transaction ID : SA11AI.59510

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Robert Stern

C.

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		20		2014

Transaction ID : SA11AI.59511

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59432</b>	
City	State	Zip Code		
Cheshire	CT	06410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Self-employed		Occupation Business Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59433</b>	
City	State	Zip Code		
Cheshire	CT	06410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Self-employed		Occupation Business Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59610</b>	
City	State	Zip Code		
Cheshire	CT	06410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Self-employed		Occupation Business Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			300.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59676</b>	
City	State	Zip Code		
Cheshire	CT	06410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Self-employed			Occupation Business Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 1600.00	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59698</b>	
City	State	Zip Code		
Cheshire	CT	06410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Self-employed			Occupation Business Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 1700.00	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Robert Stern</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 99 Terrell Farm Place			<b>Transaction ID : SA11AI.59779</b>	
City	State	Zip Code		
Cheshire	CT	06410		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Self-employed			Occupation Business Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 1800.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....			300.00	
<b>TOTAL</b> This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Robert Stern**

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.60593

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**James M. Sullivan**

Mailing Address 30 Butternut Drive

City

Norwich

State

CT

Zip Code

06360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Consulting, LLC

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.59419

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Christopher J. Swift**

Mailing Address 49 Winfield Lane

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American International Group

Occupation

VP and CFO - Life and Retirement Serv.

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2014

Transaction ID : SA11AI.59816

Amount of Each Receipt this Period

1000.00

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

1600.00

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

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

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Edward Tafaro

A.

Mailing Address 1 International Blvd

City

Mahwah

State

NJ

Zip Code

07495

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Exceptional Risk AdvisorsOccupation  
Insurance

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2014

Transaction ID : SA11AI.59345

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Jonathan Talisman

B.

Mailing Address 8904 Oneida Lane

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Tax AdvisersOccupation  
Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2014

Transaction ID : SA11AI.59875

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Chirag B. Thaker

C.

Mailing Address 208 Deer Run Trail

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Russell & Dawson, LLCOccupation  
Engineer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2014

Transaction ID : SA11AI.59672

Amount of Each Receipt this Period

2600.00

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

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

4600.00

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

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Jalpa C. Thaker**

Mailing Address 208 Deer Run Trail

City

Manchester

State

CT

Zip Code

06042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Russell & Dawson

Occupation

Office Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2014

Transaction ID : SA11AI.59673

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**McGovern Thomas**

Mailing Address 14 Overland Court

City

Branford

State

CT

Zip Code

06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT Hospice

Occupation

CFO

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.59323

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Henry H. Timken**

Mailing Address 2842 Main Street

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2014

Transaction ID : SA11AI.59693

Amount of Each Receipt this Period

2000.00

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

3500.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**William J. Wade Jr.**

**A.**

Mailing Address 100 Wells Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Burner

Occupation

Principal

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1010.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 22 / 2014

**Transaction ID : SA11AI.60457**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**William J. Wade Jr.**

**B.**

Mailing Address 100 Wells Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Burner

Occupation

Principal

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1065.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 25 / 2014

**Transaction ID : SA11AI.60458**

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**Judith Walter**

**C.**

Mailing Address 442 East Carriage Drive

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 12 / 2014

**Transaction ID : SA11AI.60413**

Amount of Each Receipt this Period

500.00

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

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

565.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Denise M. Whitford**

Mailing Address 121 Charles Street

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Connecticut

Occupation

Small Business Development

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		29		2014

Transaction ID : SA11AI.59624

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Lisa A. Winkler**

Mailing Address 22 Avalon Drive

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lobbyist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SA11AI.59711

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Robert K. Yass**

Mailing Address 1368 Asylum Avenue

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartford Financial Services

Occupation

Government Affairs

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		14		2014

Transaction ID : SA11AI.59342

Amount of Each Receipt this Period

250.00

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

750.00

87745.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ACE GROUP HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 436 WALNUT STREET

WAO4P

City

PHILADELPHIA

State

PA

Zip Code

19106

FEC ID number of contributing  
federal political committee.**C** C00348938

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : SA11C.59477

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**ACTBLUE**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SA11C.59987

Amount of Each Receipt this Period

100.00

Earmarked by Bruce Bernstein

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**AEGON USA, LLC/TRANSAMERICA CORPORATION PAC**

Mailing Address 1001 PENNSYLVANIA AVENUE, NW

SUITE 500A SOUTH

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00236414

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

9000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		21		2014

Transaction ID : SA11C.59559

Amount of Each Receipt this Period

4000.00

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

5500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address WORLDWIDE HEADQUARTERS

City

COLUMBUS

State

GA

Zip Code

31999

FEC ID number of contributing  
federal political committee.

C C00034157

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		07		2014

Transaction ID : SA11C.59445

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

AIR LINE PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1625 MASSACHUSETTS AVE, N.W.

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00035451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		23		2014

Transaction ID : SA11C.59877

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

ALCOA INC EMPLOYEES' VOLUNTARY POLITICAL ACTION COMMITTEE

Mailing Address 1909 K STREET, NW  
SUITE 300

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C C00501106

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		16		2014

Transaction ID : SA11C.59735

Amount of Each Receipt this Period

1000.00

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

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

5000.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMBULATORY SURGERY CENTER ASSOCIATION PAC (ASCPAC)**

Mailing Address 1012 CAMERON STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00424788

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : SA11C.59947

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. AMBULATORY SURGERY CENTER ASSOCIATION PAC (ASCPAC)**

Mailing Address 1012 CAMERON STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00424788

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

8000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11C.59913

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. AMERICAN ACADEMY OF NEUROLOGY PROFESSIONAL ASSOCIATION BRAIN PAC; THE**

Mailing Address 1080 Montreal Avenue

City

St. Paul

State

MN

Zip Code

55116

FEC ID number of contributing  
federal political committee.

C

C00435933

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Transaction ID : SA11C.59742

Amount of Each Receipt this Period

1000.00

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
 AMERICAN ACADEMY OF PEDIATRIC DENTISTRY POLITICAL ACTION COMMITTEE

Mailing Address 211 E Chicago Ave  
 Suite 700

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing  
federal political committee.

**C** C00365965

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		21		2014

Transaction ID : SA11C.59587

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
 AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 1050 31st Street N.W.

City	State	Zip Code
Washington	DC	20007

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : SA11C.59864

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
 AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE

Mailing Address 9700 West Bryn Mawr Ave.

City	State	Zip Code
Rosemont	IL	60018

FEC ID number of contributing  
federal political committee.

**C** C00005660

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11C.59911

Amount of Each Receipt this Period

4000.00

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

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

6000.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE****A.**

Mailing Address 401 N. LINDBERGH BLVD

City

ST. LOUIS

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.**C** C00293910

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 21 / 2014**Transaction ID : SA11C.59591**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN BUS ASSOCIATION-BUSPAC POLITICAL ACTION COMMITTEE****B.**Mailing Address 111 K STREET NE  
9TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C** C00004879

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2014**Transaction ID : SA11C.59448**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN DENTAL POLITICAL ACTION COMMITTEE****C.**

Mailing Address 1111 14TH STREET, NW, 11TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 21 / 2014**Transaction ID : SA11C.59583**

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN GAMING ASSOCIATION POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 1299 Pennsylvania Ave NW  
Suite 1175

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing federal political committee.

**C** C00309146

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2014

**Transaction ID : SA11C.59602**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE (AHCA-PAC)**

**B.**

Mailing Address 1201 L STREET NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

**C** C00006080

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2014

**Transaction ID : SA11C.59736**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address Palladian 1  
220 Leigh Farm Rd

City	State	Zip Code
Durham	NC	27707

FEC ID number of contributing federal political committee.

**C** C00077321

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4952.36

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2014

**Transaction ID : SA11C.59313**

Amount of Each Receipt this Period

452.36

In-kind - Food and beverage and facility fee

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

3952.36

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

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

**A.**

Mailing Address Palladian 1

220 Leigh Farm Rd

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing  
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5452.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2014

Transaction ID : SA11C.59560

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 1101 VERMONT AVENUE N W

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00000422

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2014

Transaction ID : SA11C.59832

Amount of Each Receipt this Period

1000.00

Contribution refunded on 7/18/2014

Full Name (Last, First, Middle Initial)

AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 1101 VERMONT AVENUE N W

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00000422

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2014

Transaction ID : SA11C.59592

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 AMERICAN OSTEOPATHIC INFORMATION ASSOCIATION - OSTEOPATHIC POLITICAL ACTION COMMITTEE

**A.** Mailing Address 1090 Vermont Ave. NW  
 Suite 510

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00113803

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 08 20 2014

Transaction ID : SA11C.59561

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)  
 AMERICAN PODIATRIC MEDICAL ASSOCIATION INC PODIATRY POLITICAL ACTION COMMITTEE

**B.** Mailing Address 9312 OLD GEORGETOWN ROAD

City State Zip Code  
 BETHESDA MD 20814

FEC ID number of contributing  
federal political committee.

**C** C00008839

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 24 2014

Transaction ID : SA11C.59865

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)  
 AMERICAN PUBLIC POWER ASSOCIATION, PUBLIC OWNERSHIP OF ELECTRIC RESOURCES PAC

**C.** Mailing Address 1875 CONNECTICUT AVENUE NW  
 SUITE 1200

City State Zip Code  
 WASHINGTON DC 20009

FEC ID number of contributing  
federal political committee.

**C** C00161570

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 09 2014

Transaction ID : SA11C.59833

Amount of Each Receipt this Period

750.00

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

4250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN RESORT DEVELOPMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ARDA-PAC)

**A.**

Mailing Address 1201 15TH STREET NW 4TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00129932

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : SA11C.59878**

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN RESORT DEVELOPMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ARDA-PAC)

Mailing Address 1201 15TH STREET NW 4TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00129932

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2014

**Transaction ID : SA11C.59866**

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

Mailing Address 1575 I Street NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00041566

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SA11C.59737**

Amount of Each Receipt this Period

1500.00

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

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN VETERINARY MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 1910 Sunderland Place, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00114132

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

MM / DD / YYYY  
09 / 18 / 2014

**Transaction ID : SA11C.59773**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMGEN INC. POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 601 13th Street, NW  
12th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00251876

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

MM / DD / YYYY  
08 / 20 / 2014

**Transaction ID : SA11C.59562**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMGEN INC. POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 601 13th Street, NW  
12th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00251876

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SA11C.59738**

Amount of Each Receipt this Period

1500.00

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

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

3500.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMPHASTAR PHARMACEUTICALS INC PACAKA AMPHASTAR PAC**

Mailing Address 11570 6TH STREET

City	State	Zip Code
RANCHO CUCAMONGA	CA	91730

FEC ID number of contributing federal political committee.

**C** C00543835

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2014

Transaction ID : SA11C.59739

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING POLITICAL ACTION COMMITTEE (AALU PAC)**

Mailing Address 2901 Telestar Court 4th Floor

City	State	Zip Code
Falls Church	VA	22042

FEC ID number of contributing federal political committee.

**C** C00447565

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2014

Transaction ID : SA11C.59853

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING POLITICAL ACTION COMMITTEE (AALU PAC)**

Mailing Address 2901 Telestar Court 4th Floor

City	State	Zip Code
Falls Church	VA	22042

FEC ID number of contributing federal political committee.

**C** C00447565

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

9000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 22 / 2014

Transaction ID : SA11C.59775

Amount of Each Receipt this Period

500.00

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

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

3000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>ASSURANT INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	09		05		2014
M M M	/	D D D	/	Y Y Y Y Y									
09		05		2014									
Mailing Address 501 W. Michigan St. PO BOX 3050		<b>Transaction ID : SA11C.59684</b>											
City Milwaukee	State WI	Zip Code 53203											
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> <td>C00185694</td> </tr> </table>		C	C00185694								
C	C00185694												
Name of Employer		Occupation											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td></td> <td>1500.00</td> </tr> </table>			1500.00								
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Amount of Each Receipt this Period <table border="1"> <tr> <td></td> <td>1500.00</td> </tr> </table>			1500.00										
	1500.00												
<b>B.</b> Full Name (Last, First, Middle Initial) <b>BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	09		08		2014
M M M	/	D D D	/	Y Y Y Y Y									
09		08		2014									
Mailing Address 600 PEACHTREE ST STE 1500 PO BOX 40789		<b>Transaction ID : SA11C.59675</b>											
City ATLANTA	State GA	Zip Code 30308											
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> <td>C00094656</td> </tr> </table>		C	C00094656								
C	C00094656												
Name of Employer		Occupation											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td></td> <td>10000.00</td> </tr> </table>			10000.00								
	10000.00												
Amount of Each Receipt this Period <table border="1"> <tr> <td></td> <td>2000.00</td> </tr> </table>			2000.00										
	2000.00												
<b>C.</b> Full Name (Last, First, Middle Initial) <b>BIOTECHNOLOGY INDUSTRY ORGANIZATION PAC (BIO PAC)</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		07		2014
M M M	/	D D D	/	Y Y Y Y Y									
08		07		2014									
Mailing Address 1201 Maryland Ave S. W. Suite 900 SUITE 400		<b>Transaction ID : SA11C.59446</b>											
City Washington	State DC	Zip Code 20024											
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> <td>C00355677</td> </tr> </table>		C	C00355677								
C	C00355677												
Name of Employer		Occupation											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td></td> <td>2000.00</td> </tr> </table>			2000.00								
	2000.00												
Amount of Each Receipt this Period <table border="1"> <tr> <td></td> <td>1000.00</td> </tr> </table>			1000.00										
	1000.00												
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td></td> <td>4500.00</td> </tr> </table>			4500.00								
	4500.00												
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td></td> <td></td> </tr> </table>											

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

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CENTURYLINK INC. EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1099 NEW YORK AVENUE NW

SUITE 250

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00419911

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2014

Transaction ID : SA11C.59886

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CHESAPEAKE ENERGY CORPORATION FED-PAC**

Mailing Address PO Box 18496

City

Oklahoma City

State

OK

Zip Code

73154

FEC ID number of contributing  
federal political committee.

**C** C00389288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2014

Transaction ID : SA11C.59867

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CHICAGO BOARD OF OPTIONS EXCHANGE INC PAC**

Mailing Address 400 S. LaSalle Street

City

Chicago

State

IL

Zip Code

60605

FEC ID number of contributing  
federal political committee.

**C** C00100693

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 20 / 2014

Transaction ID : SA11C.59517

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CME GROUP, INC. PAC (CME/CBOT PAC)**

**A.**

Mailing Address 20 South Wacker Drive

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

**C** C00076299

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2014

**Transaction ID : SA11C.59881**

Amount of Each Receipt this Period

1000.00

Contribution refunded on 7/25/2014

Full Name (Last, First, Middle Initial)

**CME GROUP, INC. PAC (CME/CBOT PAC)**

**B.**

Mailing Address 20 South Wacker Drive

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

**C** C00076299

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11C.59743**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 1350 I Street, NW  
Suite 590

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00274944

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11C.59700**

Amount of Each Receipt this Period

1500.00

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

3500.00

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

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

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for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F Street, NW

Suite 300

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

C00477653

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

8000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2014

Transaction ID : SA11C.59744

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

C00163832

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11C.60596

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOBILE DEALERS ASSOCIATION (NADA)

Mailing Address 8400 WESTPARK DRIVE

City

MCLEAN

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

**C**

C00040998

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2014

Transaction ID : SA11C.59431

Amount of Each Receipt this Period

2500.00

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

5000.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DEERE & COMPANY PAC (AKA JOHN DEERE PAC)****A.**

Mailing Address One John Deere Place

DEERE &amp; COMPANY, JOHN DEERE ROAD

City	State	Zip Code
Moline	IL	61265

FEC ID number of contributing  
federal political committee.**C** C00204099

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2014

**Transaction ID : SA11C.59691**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC; THE****B.**

Mailing Address 601 13TH ST NW SUITE 580 SOUTH

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.**C** C00497917

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

**Transaction ID : SA11C.59479**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**EMBRAER AIRCRAFT HOLDING INC POLITICAL ACTION COMMITTEE (EMBRAER PAC)****C.**

Mailing Address 276 SW 34TH STREET

City	State	Zip Code
FT LAUDERDALE	FL	33315

FEC ID number of contributing  
federal political committee.**C** C00472225

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2014

**Transaction ID : SA11C.59687**

Amount of Each Receipt this Period

1500.00

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

6500.00

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

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 EMPLOYEES OF NORTHROP GRUMMAN CORPORATION POLITICAL ACTION COMMITTEE (ENGPAC)

**A.** Mailing Address 520 S GRAND AVE STE 700

City State Zip Code  
 LOS ANGELES CA 90071

FEC ID number of contributing  
federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 30 2014

Transaction ID : SA11C.59480

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
 ENTERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City State Zip Code  
 LITTLE ROCK AR 72201

FEC ID number of contributing  
federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 16 2014

Transaction ID : SA11C.59790

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
 ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 600 CORPORATE PARK DRIVE

City State Zip Code  
 ST. LOUIS MO 63105

FEC ID number of contributing  
federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 09 2014

Transaction ID : SA11C.59835

Amount of Each Receipt this Period

2500.00

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

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

5500.00

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

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 600 CORPORATE PARK DRIVE

City

ST. LOUIS

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

**C** C00219642

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2750.00

Date of Receipt

M M / D D / Y Y Y Y  
08 19 2014

Transaction ID : SA11C.59557

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City

MEMPHIS

State

TN

Zip Code

38120

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 25 2014

Transaction ID : SA11C.59950

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)**

Mailing Address 82 Devonshire Street  
N5A

City

Boston

State

MA

Zip Code

02109

FEC ID number of contributing  
federal political committee.

**C** C00380550

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 16 2014

Transaction ID : SA11C.59746

Amount of Each Receipt this Period

1000.00

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

2750.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN**

**A.**

Mailing Address 3190 FAIRVIEW PARK DRIVE

City

FALLS CHURCH

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

**C** C00078451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2014

**Transaction ID : SA11C.59481**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 1299 PENNSYLVANIA AVE NW STE 1100

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00024869

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2014

**Transaction ID : SA11C.59476**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GENERAL MOTORS CORPORATION POLITICAL ACTION COMMITTEE (GM PAC)**

**C.**

Mailing Address 25 Massachusetts Avenue NW  
Suite 400

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00076810

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2014

**Transaction ID : SA11C.59474**

Amount of Each Receipt this Period

1500.00

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

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GENWORTH FINANCIAL INC POLITICAL ACTION COMMITTEE GENWORTH PAC****A.**

Mailing Address 6620 W. Broad Street

City

Richmond

State

VA

Zip Code

23230

FEC ID number of contributing  
federal political committee.**C** C00404194

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		03		2014

**Transaction ID : SA11C.59618**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GLAXOSMITHKLINE LLC PAC (GSK PAC)****B.**Mailing Address FIVE MOORE DRIVE  
PO BOX 13358

City

RES. TRIANGLE PARK

State

NC

Zip Code

27709

FEC ID number of contributing  
federal political committee.**C** C00199703

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : SA11C.59968**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**GOLDMAN SACHS GROUP INC. POLITICAL ACTION COMMITTEE, THE****C.**Mailing Address 101 Constitution Avenue NW  
Suite 1000 East

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00350744

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		16		2014

**Transaction ID : SA11C.59762**

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

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

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(check only one)

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

A. Full Name (Last, First, Middle Initial)  
**GROOM LAW GROUP CHARTERED POLITICAL ACTION COMMITTEE**

Mailing Address 1701 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing federal political committee.

**C** C00394775

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2014

Transaction ID : SA11C.59836

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**HARDWOOD FEDERATION PAC INC**

Mailing Address 1111 Nineteenth Street NW;  
Suite 800

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

**C** C00396671

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 22 / 2014

Transaction ID : SA11C.59774

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
HEINEKEN USA INC GOOD GOVERNMENT COMMITTEE HUSA GOOD GOVERNMENT COMMITTEE (ABBREVIATION)

Mailing Address 360 HAMILTON AVENUE SUITE 1103

City	State	Zip Code
WHITE PLAINS	NY	10601

FEC ID number of contributing federal political committee.

**C** C00358234

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2014

Transaction ID : SA11C.59868

Amount of Each Receipt this Period

1500.00

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

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

3500.00

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

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for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HEWLETT PACKARD COMPANY PAC**

Mailing Address 3000 Hanover Street  
MS 1035

City Palo Alto State CA Zip Code 94304

FEC ID number of contributing federal political committee. **C** C00196725

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 29 2014

Transaction ID : SA11C.59912

Amount of Each Receipt this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 11 2014

Transaction ID : SA11C.59475

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
**HOOSIERS FIRST PAC**

Mailing Address PO BOX 772

City INDIANAPOLIS State IN Zip Code 46206

FEC ID number of contributing federal political committee. **C** C00492082

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 26 2014

Transaction ID : SA11C.59951

Amount of Each Receipt this Period

1000.00

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

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

7500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HUMANA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 975 F STREET, NW

SUITE 550

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00271007

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 29 / 2014

Transaction ID : SA11C.59965

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**INDEPENDENT INSURANCE AGENTS OF AMERICA INC POLITICAL ACTION COMMITTEE (INSURPAC)**

Mailing Address 412 FIRST STREET SE SUITE 300

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C** C00022343

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2014

Transaction ID : SA11C.59482

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**ING U.S., INC. POLITICAL ACTION COMMITTEE (ING U.S. PAC)**

Mailing Address 230 PARK AVENUE

C/O CHIEF LEGAL OFFICER

City

NEW YORK

State

NY

Zip Code

10169

FEC ID number of contributing  
federal political committee.

**C** C00184028

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2014

Transaction ID : SA11C.59861

Amount of Each Receipt this Period

3000.00

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

7500.00

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

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

Use separate schedule(s)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

**A.**

Mailing Address 1750 NEW YORK AVE NW

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00029447

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2014

**Transaction ID : SA11C.59686**

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

**IRON MOUNTAIN INCORPORATED EMPLOYEES PAC AKA IMPAC**

Mailing Address 745 ATLANTIC AVE

City

BOSTON

State

MA

Zip Code

02111

FEC ID number of contributing  
federal political committee.

**C** C00523936

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 29 / 2014

**Transaction ID : SA11C.59593**

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

**KAMAN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address BLUE HILLS AVE/P O BOX 1

City

BLOOMFIELD

State

CT

Zip Code

06002

FEC ID number of contributing  
federal political committee.

**C** C00126847

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2014

**Transaction ID : SA11C.59953**

Amount of Each Receipt this Period

1500.00

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

7500.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address PO BOX 18254

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00280222

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11C.59882**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address PO BOX 18254

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00280222

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 01 / 2014

**Transaction ID : SA11C.59483**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**LIBERTY MUTUAL INSURANCE COMPANY-PAC**

**C.**

Mailing Address 175 Berkeley Steet

City

Boston

State

MA

Zip Code

02117

FEC ID number of contributing  
federal political committee.

**C** C00171843

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 01 / 2014

**Transaction ID : SA11C.59484**

Amount of Each Receipt this Period

1000.00

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

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

4500.00

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LIBERTY MUTUAL INSURANCE COMPANY-PAC**

**A.**

Mailing Address 175 Berkeley Street

City

Boston

State

MA

Zip Code

02117

FEC ID number of contributing  
federal political committee.

**C** C00171843

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2014

**Transaction ID : SA11C.59954**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**MCKESSON CORPORATION EMPLOYEES POLITICAL FUND**

**B.**

Mailing Address ONE POST STREET 32nd FLOOR

City

SAN FRANCISCO

State

CA

Zip Code

94104

FEC ID number of contributing  
federal political committee.

**C** C00108035

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 20 / 2014

**Transaction ID : SA11C.59563**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)**

**C.**

Mailing Address 601 Pennsylvania Ave., NW  
North Building, Suite 1200

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00097485

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 06 / 2014

**Transaction ID : SA11C.59450**

Amount of Each Receipt this Period

500.00

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

7500.00

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

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

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Detailed Summary Page

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**MORGAN STANLEY POLITICAL ACTION COMMITTEE**

Mailing Address 1585 Broadway 39th Floor

City State Zip Code  
New York NY 10036

FEC ID number of contributing  
federal political committee.

C C00337626

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2014

Transaction ID : SA11C.59598

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)  
**MORGAN STANLEY POLITICAL ACTION COMMITTEE**

Mailing Address 1585 Broadway 39th Floor

City State Zip Code  
New York NY 10036

FEC ID number of contributing  
federal political committee.

C C00337626

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2014

Transaction ID : SA11C.59599

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**MOTOR AND EQUIPMENT MANUFACTURERS ASSOCIATION PAC (MEMA PAC)**

Mailing Address PO BOX 65853

City State Zip Code  
WASHINGTON DC 20035

FEC ID number of contributing  
federal political committee.

C C00479964

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 16 2014

Transaction ID : SA11C.59753

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Mailing Address 4300 WILSON BLVD

SUITE 400

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C C00113241

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2014

Transaction ID : SA11C.59837

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

B.

Mailing Address 1771 N Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00009985

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11C.60597

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

C.

Mailing Address 3601 VINCENNES ROAD

PO BOX 68700

City

INDIANAPOLIS

State

IN

Zip Code

46268

FEC ID number of contributing  
federal political committee.

C C00170258

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2014

Transaction ID : SA11C.59692

Amount of Each Receipt this Period

2500.00

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

6000.00

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

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

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for each category of the  
Detailed Summary Page

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(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE

**A.** Mailing Address 1875 Eye Street NW  
 Suite 600

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 08 07 2014

Transaction ID : SA11C.59451

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)  
 NATIONAL BEER WHOLESALERS' ASSOCIATION POLITICAL ACTION COMMITTEE (NBWA PAC)

**B.** Mailing Address 1100 SOUTH WASHINGTON STREET

City State Zip Code  
 ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 7500.00

Date of Receipt

M M / D D / Y Y Y Y  
 08 20 2014

Transaction ID : SA11C.59564

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)  
 NATIONAL BEER WHOLESALERS' ASSOCIATION POLITICAL ACTION COMMITTEE (NBWA PAC)

**C.** Mailing Address 1100 SOUTH WASHINGTON STREET

City State Zip Code  
 ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 26 2014

Transaction ID : SA11C.59955

Amount of Each Receipt this Period

2500.00

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

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

10000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

Full Name (Last, First, Middle Initial)  
 NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

**A.** Mailing Address 1724 MASSACHUSETTS AVENUE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C** C00010082

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 / 31 / 2014

Transaction ID : SA11C.59486

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)  
**B.** NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY & MEDICARE - PAC

Mailing Address 2000 K STREET

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee.

**C** C70002597

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 / 09 / 2014

Transaction ID : SA11C.59838

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)  
**C.** NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Mailing Address 469 HOSPITAL DR.  
 SUITE C

City	State	Zip Code
GASTONIA	NC	28054

FEC ID number of contributing federal political committee.

**C** C00405555

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 08 / 20 / 2014

Transaction ID : SA11C.59515

Amount of Each Receipt this Period

1000.00

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

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

4500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 1850 M Street NW Suite 540

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2014

**Transaction ID : SA11C.59487**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 1850 M Street NW Suite 540

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

8000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2014

**Transaction ID : SA11C.59956**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**NATIONAL READY MIXED CONCRETE ASSN. PAC (CONCRETEPAC)**

**C.**

Mailing Address 900 SPRING ST.

City

SILVER SPRING

State

MD

Zip Code

20910

FEC ID number of contributing  
federal political committee.

**C** C00114025

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11C.60579**

Amount of Each Receipt this Period

1000.00

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

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

4000.00

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)**

Mailing Address 2055 L STREET, NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C** C00003764

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2014

Transaction ID : SA11C.59452

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)  
**NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1630 DUKE STREET 4TH FLOOR

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C** C00072025

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2014

Transaction ID : SA11C.59685

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1750 H STREET, NW

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee.

**C** C00107128

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2014

Transaction ID : SA11C.59491

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

Use separate schedule(s)  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1750 H STREET, NW

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee.

**C** C00107128

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : SA11C.59961

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address One Nationwide Plaza  
1-27-10

City	State	Zip Code
Columbus	OH	43215

FEC ID number of contributing federal political committee.

**C** C00076174

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		20		2014

Transaction ID : SA11C.59565

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**NELSON MULLINS RILEY & SCARBOROUGH, LLP FEDERAL POLITICAL COMMITTEE**

Mailing Address 1320 MAIN STREET, 17TH FLOOR

City	State	Zip Code
COLUMBIA	SC	29201

FEC ID number of contributing federal political committee.

**C** C00278895

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Transaction ID : SA11C.59755

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

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for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**OLDCASTLE MATERIALS INC PAC**

Mailing Address 1420 NEW YORK AVE NW #1050

C/O VAN SCOYOC ASSOC

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00346353

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 16 / 2014

Transaction ID : SA11C.59756

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)**

Mailing Address 1015 15th St. NW Suite 200

Suite 200

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00323048

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2014

Transaction ID : SA11C.59957

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 700 Newport Center Drive

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

**C** C00068528

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2014

Transaction ID : SA11C.59958

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PENNEY PAC - J.C.PENNEY CORP. INC. POLITICAL ACTION COMMITTEE****A.**

Mailing Address 6501 LEGACY DR.

City

PLANO

State

TX

Zip Code

75024

FEC ID number of contributing federal political committee.

**C**

C00042895

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 16 2014**Transaction ID : SA11C.59757**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**POLSINELLI SHUGHART PC PAC****B.**Mailing Address 700 WEST 47TH STREET  
SUITE 1000

City

KANSAS CITY

State

MO

Zip Code

64112

FEC ID number of contributing federal political committee.

**C**

C00445981

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 16 2014**Transaction ID : SA11C.59758**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

**C.**

Mailing Address 2600 South River Road

City

Des Plaines

State

IL

Zip Code

60018

FEC ID number of contributing federal political committee.

**C**

C00066472

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 17 2014**Transaction ID : SA11C.59883**

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

**A.**

Mailing Address 751 Broad Street

3RD FLOOR PRUDENTIAL PLAZA

City

Newark

State

NJ

Zip Code

07102

FEC ID number of contributing  
federal political committee.

**C** C00127779

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2014

Transaction ID : SA11C.59453

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

**QUICKEN LOANS INC PAC**

Mailing Address 101 S. WASHINGTON SQ.

SUITE 620

City

LANSING

State

MI

Zip Code

48933

FEC ID number of contributing  
federal political committee.

**C** C00388827

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 16 / 2014

Transaction ID : SA11C.59759

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

**REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)**

Mailing Address 801 Pennsylvania Avenue

Suite 720

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00033779

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2014

Transaction ID : SA11C.59884

Amount of Each Receipt this Period

1000.00

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

7000.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**REALTORS POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 430 NORTH MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2014

**Transaction ID : SA11C.59488**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**REALTORS POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 430 NORTH MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 18 / 2014

**Transaction ID : SA11C.59507**

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

**SECURITIES INDUSTRY ASSOCIATION POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 1425 K Street NW  
7th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00067504

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 29 / 2014

**Transaction ID : SA11C.59966**

Amount of Each Receipt this Period

2000.00

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

7000.00

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

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

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(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION (SEIU COPE)

**A.**

Mailing Address 1800 Massachusetts Ave NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

**C** C00004036

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 / 12 / 2014

Transaction ID : SA11C.59831

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
**SIERRA CLUB POLITICAL COMMITTEE**

Mailing Address 85 SECOND STREET SECOND FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

FEC ID number of contributing federal political committee.

**C** C00135368

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 08 / 11 / 2014

Transaction ID : SA11C.59473

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)  
**SPECTRA ENERGY CORP POLITICAL ACTION COMMITTEE (SPECTRA-DCP PAC)**

Mailing Address 5400 Westheimer Court

City	State	Zip Code
Houston	TX	77056

FEC ID number of contributing federal political committee.

**C** C00429662

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 / 29 / 2014

Transaction ID : SA11C.59967

Amount of Each Receipt this Period

1000.00

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

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

7500.00

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

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for each category of the  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 STATE STREET BANK AND TRUST COMPANY VOLUNTARY POLITICAL ACTION COMMITTEE

**A.** Mailing Address BOX 5351

City	State	Zip Code
BOSTON	MA	02206

FEC ID number of contributing federal political committee.

**C** C00072751

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 / 24 / 2014

Transaction ID : SA11C.59873

Amount of Each Receipt this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Mailing Address 3000 RIVERCHASE GALLERIA  
 SUITE 500

City	State	Zip Code
BIRMINGHAM	AL	35244

FEC ID number of contributing federal political committee.

**C** C00440743

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 / 17 / 2014

Transaction ID : SA11C.59761

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**SYMBION GOOD GOVERNMENT FUND**

Mailing Address 40 BURTON HILLS BOULEVARD  
 SUITE 500

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

**C** C00520833

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 / 25 / 2014

Transaction ID : SA11C.59959

Amount of Each Receipt this Period

2500.00

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

**A.** Mailing Address 1101 Pennsylvania Avenue NW  
 Suite 800

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 17 2014

Transaction ID : SA11C.59885

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE GRANT THORNTON LLP POLITICAL ACTION COMMITTEE LLC**

Mailing Address 175 W. JACKSON BLVD.  
 SUITE 2000

City State Zip Code  
 CHICAGO IL 60604

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 18 2014

Transaction ID : SA11C.59750

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**THE HARTFORD ADVOCATES FUND**

Mailing Address ONE HARTFORD PLAZA

City State Zip Code  
 HARTFORD CT 06155

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 14 2014

Transaction ID : SA11C.59813

Amount of Each Receipt this Period

5000.00

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

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

8000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**James E. Throwe**

Mailing Address 1330 Main Street

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

25.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 18 / 2014

Transaction ID : SA11C.59493

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**TW TELECOM INC. POLITICAL ACTION COMMITTEE**

Mailing Address 10475 PARK MEADOWS DRIVE

City

LITTLETON

State

CO

Zip Code

80124

FEC ID number of contributing  
federal political committee.

C C00355941

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 22 / 2014

Transaction ID : SA11C.59776

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)**

Mailing Address 8000 EAST JEFFERSON

City

DETROIT

State

MI

Zip Code

48214

FEC ID number of contributing  
federal political committee.

C C00002840

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 20 / 2014

Transaction ID : SA11C.59518

Amount of Each Receipt this Period

5000.00

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

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

6025.00

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>UBS AMERICAS FUND FOR BETTER GOVERNMENT</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		05		2014
M M	/	D D	/	Y Y Y Y									
09		05		2014									
Mailing Address 1285 AVENUE OF THE AMERICAS		<b>Transaction ID : SA11C.59690</b>											
City NEW YORK	State NY	Zip Code 10019	Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00									
2500.00													
FEC ID number of contributing federal political committee. <b>C</b> C00012245													
Name of Employer	Occupation												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>7500.00</td> </tr> </table>		7500.00										
7500.00													
<b>B.</b> Full Name (Last, First, Middle Initial) <b>UBS AMERICAS FUND FOR BETTER GOVERNMENT</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		29		2014
M M	/	D D	/	Y Y Y Y									
09		29		2014									
Mailing Address 1285 AVENUE OF THE AMERICAS		<b>Transaction ID : SA11C.59969</b>											
City NEW YORK	State NY	Zip Code 10019	Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00									
2500.00													
FEC ID number of contributing federal political committee. <b>C</b> C00012245													
Name of Employer	Occupation												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>10000.00</td> </tr> </table>		10000.00										
10000.00													
<b>C.</b> Full Name (Last, First, Middle Initial) <b>UNITED SURGICAL PARTNERS INTERNATIONAL INC POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		26		2014
M M	/	D D	/	Y Y Y Y									
09		26		2014									
Mailing Address 15305 Dallas Parkway Suite 1600		<b>Transaction ID : SA11C.59962</b>											
City Addison	State TX	Zip Code 75001	Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00									
2500.00													
FEC ID number of contributing federal political committee. <b>C</b> C00402073													
Name of Employer	Occupation												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>2500.00</td> </tr> </table>		2500.00										
2500.00													
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td>7500.00</td> </tr> </table>		7500.00									
7500.00													
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td></td> </tr> </table>											

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

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

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(check only one)

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

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**UNITED TECHNOLOGIES CORPORATION, POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 1401 EYE STREET NW SUITE 600

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 16 / 2014

**Transaction ID : SA11C.59763**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

VANGUARD GROUP COMMITTEE FOR RESPONSIBLE GOVERNMENT (VANGUARD COMMITTEE FOR RESPONSIBL, TH

**B.**

Mailing Address 400 Devon Park Drive

City

Wayne

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

**C** C00410266

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2014

**Transaction ID : SA11C.59963**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**VERIZON COMMUNICATION INC GOOD GOVT CLUB**

**C.**

Mailing Address 771 Parkway Ave  
1717 ARCH ST. 47S

City

Ewing

State

NJ

Zip Code

08618

FEC ID number of contributing  
federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11C.60598**

Amount of Each Receipt this Period

2500.00

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

8000.00

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

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

Use separate schedule(s)  
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(check only one)

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

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2014

**Transaction ID : SA11C.59876**

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SA11C.59764**

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

**WINE INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 607 14th Street NW Suite 800  
Suite 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00065219

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2014

**Transaction ID : SA11C.59964**

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 ZURICH HOLDING COMPANY OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)

**A.**

Mailing Address 1201 F Street NW

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00235036

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 09 29 2014

**Transaction ID : SA11C.59970**

Amount of Each Receipt this Period

2500.00

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

234977.36

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

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

FOR LINE NUMBER:  
(check only one)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>JOHN B LARSON</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		14		2014
M M	/	D D	/	Y Y Y Y									
07		14		2014									
Mailing Address 1887 OLD MAIN STREET		<b>Transaction ID : SA14.59888</b>											
City EAST HARTFORD	State CT	Zip Code 06108											
FEC ID number of contributing federal political committee. <b>C</b> H8CT01046		Amount of Each Receipt this Period <table border="1"> <tr> <td>120.45</td> </tr> </table>		120.45									
120.45													
Name of Employer U. S. Congress	Occupation Member of Congress	Reimbursement - mileage											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>2852.07</td> </tr> </table>	2852.07											
2852.07													
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JOHN B LARSON</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		22		2014
M M	/	D D	/	Y Y Y Y									
08		22		2014									
Mailing Address 1887 OLD MAIN STREET		<b>Transaction ID : SA14.59609</b>											
City EAST HARTFORD	State CT	Zip Code 06108											
FEC ID number of contributing federal political committee. <b>C</b> H8CT01046		Amount of Each Receipt this Period <table border="1"> <tr> <td>97.00</td> </tr> </table>		97.00									
97.00													
Name of Employer U. S. Congress	Occupation Member of Congress	Reimbursement - mileage											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>2949.07</td> </tr> </table>	2949.07											
2949.07													
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOHN B LARSON</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		19		2014
M M	/	D D	/	Y Y Y Y									
09		19		2014									
Mailing Address 1887 OLD MAIN STREET		<b>Transaction ID : SA14.59788</b>											
City EAST HARTFORD	State CT	Zip Code 06108											
FEC ID number of contributing federal political committee. <b>C</b> H8CT01046		Amount of Each Receipt this Period <table border="1"> <tr> <td>157.30</td> </tr> </table>		157.30									
157.30													
Name of Employer U. S. Congress	Occupation Member of Congress	Reimbursement - mileage											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>3106.37</td> </tr> </table>	3106.37											
3106.37													
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td>374.75</td> </tr> </table>		374.75									
374.75													
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td>374.75</td> </tr> </table>		374.75									
374.75													

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LARSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Rockville Bank</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 1009 Hebron Avenue		<b>Transaction ID : SA15.60304</b>	
City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 94.49 Interest
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 962.58		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Rockville Bank</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2014	
Mailing Address 1009 Hebron Avenue		<b>Transaction ID : SA15.60305</b>	
City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 99.42 Interest
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1062.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Rockville Bank</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 1009 Hebron Avenue		<b>Transaction ID : SA15.60306</b>	
City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 85.56 Interest
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1147.56		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		279.47	
<b>TOTAL</b> This Period (last page this line number only).....		279.47	

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

PAGE 119 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Advanced Network Strategies, LLC**

Mailing Address 236 Massachusetts Avenue, N.E.

City	State	Zip Code
Washington	DC	22220

Purpose of Disbursement  
Fund raising fees and expenses

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

5419.79
---------

Transaction ID : SB17.60319

**B. Advanced Network Strategies, LLC**

Mailing Address 236 Massachusetts Avenue, N.E.

City	State	Zip Code
Washington	DC	22220

Purpose of Disbursement  
Fund raising fees and expenses

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

6198.43
---------

Transaction ID : SB17.60548

**C. Advanced Network Strategies, LLC**

Mailing Address 236 Massachusetts Avenue, N.E.

City	State	Zip Code
Washington	DC	22220

Purpose of Disbursement  
Fund raising fees and expenses

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

6451.54
---------

Transaction ID : SB17.60180

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

18069.76

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

2.51
------

Transaction ID : SB17.60637

**B. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

19.91
-------

Transaction ID : SB17.60638

**C. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Credit Card Payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

2699.93
---------

Transaction ID : SB17.59114

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

2722.35

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2014

Amount of Each Disbursement this Period

12.01
-------

Transaction ID : SB17.59114.0

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2014

Amount of Each Disbursement this Period

88.75
-------

Transaction ID : SB17.59114.2

**[MEMO ITEM]****C. Southwest Airlines**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06096

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

232.00
--------

Transaction ID : SB17.59114.3

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement  
Cell phone supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

63.79
-------

Transaction ID : SB17.59114.5

**[MEMO ITEM]****B. Max Fish**

Mailing Address 140 Glastonbury Blvd.

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

143.96
--------

Transaction ID : SB17.59114.6

**[MEMO ITEM]****c. Harris Teeter**

Mailing Address 1300 Colonial Avenue

City	State	Zip Code
Norfolk	VA	23517

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

57.81
-------

Transaction ID : SB17.59114.9

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Dunkin Donuts**

Mailing Address 271 Farmington Avenue

City	State	Zip Code
Hartford	CT	06116

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

Amount of Each Disbursement this Period

45.98
-------

Transaction ID : SB17.59114.11

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

158.75
--------

Transaction ID : SB17.59114.14

**[MEMO ITEM]****c. Peppercorn's Grill**

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

127.63
--------

Transaction ID : SB17.59114.17

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

0.00
------

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Augie & Ray's**

Mailing Address 314 Main Street

City	State	Zip Code
East Hartford	CT	06118

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

24.83
-------

Transaction ID : SB17.59114.18

**[MEMO ITEM]****B. Max Fish**

Mailing Address 140 Glastonbury Blvd.

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

Amount of Each Disbursement this Period

147.44
--------

Transaction ID : SB17.59114.19

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

21.00
-------

Transaction ID : SB17.59114.22

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 125 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

16.00
-------

Transaction ID : SB17.59114.23

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

Amount of Each Disbursement this Period

79.38
-------

Transaction ID : SB17.59114.25

**[MEMO ITEM]****c. The Bouqs Company**

Mailing Address 4766 Admiralty Way

City	State	Zip Code
Marina Del Ray	CA	90295

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.59114.26

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. House Gift Shop**

Mailing Address B-217 Longworth Bldg.

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
Gifts

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

Amount of Each Disbursement this Period

150.00
--------

Transaction ID : SB17.59114.29

**[MEMO ITEM]****B. Carbone's**

Mailing Address 80 Goodrich Street

City	State	Zip Code
Hartford	CT	06114

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

102.74
--------

Transaction ID : SB17.59114.30

**[MEMO ITEM]****c. Whole Foods Markets**

Mailing Address 90 Raymond Road

City	State	Zip Code
West Hartford	CT	06107

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

290.95
--------

Transaction ID : SB17.59114.32

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Schneider's Liquors**

Mailing Address 300 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Beverages

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

178.07
--------

Transaction ID : SB17.59114.33

**[MEMO ITEM]****B. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

7.95
------

Transaction ID : SB17.60630

**c. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2014

Amount of Each Disbursement this Period

247.83
--------

Transaction ID : SB17.60635

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

255.78

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

5062.39
---------

Transaction ID : SB17.60195

**B. Schneider's Liquors**

Mailing Address 300 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Beverages

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

736.13
--------

Transaction ID : SB17.60195.1

[MEMO ITEM]

**C. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

100.63
--------

Transaction ID : SB17.60195.3

[MEMO ITEM]

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

5062.39

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 129 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. Dunkin Donuts**

Mailing Address 271 Farmington Avenue

City State Zip Code  
Hartford CT 06116

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 18 2014

Amount of Each Disbursement this Period

35.70

Transaction ID : SB17.60195.4

[MEMO ITEM]

## **B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 18 2014

Amount of Each Disbursement this Period

47.50

Transaction ID : SB17.60195.5

[MEMO ITEM]

## **c. Cavey's**

Mailing Address 43 E. Center Street

City State Zip Code  
Manchester CT 06040

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 20 2014

Amount of Each Disbursement this Period

101.55

Transaction ID : SB17.60195.6

[MEMO ITEM]

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

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

0.00

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

PAGE 130 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Dunkin Donuts**

Mailing Address 271 Farmington Avenue

City	State	Zip Code
Hartford	CT	06116

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

35.99
-------

Transaction ID : SB17.60195.8

**[MEMO ITEM]****B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

130.63
--------

Transaction ID : SB17.60195.9

**[MEMO ITEM]****c. The Bouqs Company**

Mailing Address 4766 Admiralty Way

City	State	Zip Code
Marina Del Ray	CA	90295

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.60195.11

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Max Fish**

Mailing Address 140 Glastonbury Blvd.

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

93.21
-------

Transaction ID : SB17.60195.14

**[MEMO ITEM]****B. Peppercorn's Grill**

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

Amount of Each Disbursement this Period

74.24
-------

Transaction ID : SB17.60195.15

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2014

Amount of Each Disbursement this Period

18.00
-------

Transaction ID : SB17.60195.17

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sonoma**

Mailing Address 223 Pennsylvania Avenue, S.E.

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

124.30
--------

Transaction ID : SB17.60195.20

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

29.00
-------

Transaction ID : SB17.60195.21

**[MEMO ITEM]****C. Exxon/Mobil**

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement  
Gasoline

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

49.14
-------

Transaction ID : SB17.60195.22

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

220.63
--------

Transaction ID : SB17.60195.23

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

45.00
-------

Transaction ID : SB17.60195.24

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

47.00
-------

Transaction ID : SB17.60195.25

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

27.00
-------

Transaction ID : SB17.60195.27

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

13.00
-------

Transaction ID : SB17.60195.28

**[MEMO ITEM]****c. Corner Bakery**

Mailing Address 529 14th St., NW

City	State	Zip Code
Washington	DC	20045

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

206.18
--------

Transaction ID : SB17.60195.29

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		04		2014

Amount of Each Disbursement this Period

13.00
-------

Transaction ID : SB17.60195.31

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		04		2014

Amount of Each Disbursement this Period

14.00
-------

Transaction ID : SB17.60195.32

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		04		2014

Amount of Each Disbursement this Period

15.00
-------

Transaction ID : SB17.60195.33

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.60195.35

**[MEMO ITEM]****B. Carbone's**

Mailing Address 80 Goodrich Street

City	State	Zip Code
Hartford	CT	06114

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

162.60
--------

Transaction ID : SB17.60195.36

**[MEMO ITEM]****c. RA Rayburn**

Mailing Address Rayburn House Office Building

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

25.85
-------

Transaction ID : SB17.60195.38

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

15.00
-------

Transaction ID : SB17.60195.40

**[MEMO ITEM]****B. Casa Luca**

Mailing Address 1099 New York Ave NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

525.80
--------

Transaction ID : SB17.60195.41

**[MEMO ITEM]****c. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

40.00
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Transaction ID : SB17.60195.42

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

717.00
--------

Transaction ID : SB17.60195.43

**[MEMO ITEM]****B. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB17.60195.48

**[MEMO ITEM]****c. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

283.00
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Transaction ID : SB17.60195.49

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 139 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

31.88
-------

Transaction ID : SB17.60195.50

**[MEMO ITEM]****B. Dav El Services**

Mailing Address 6212 Park Street, Northeast

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2014

Amount of Each Disbursement this Period

203.24
--------

Transaction ID : SB17.60195.52

**[MEMO ITEM]****c. Dav El Services**

Mailing Address 6212 Park Street, Northeast

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2014

Amount of Each Disbursement this Period

157.68
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Transaction ID : SB17.60195.53

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		05		2014

Amount of Each Disbursement this Period

29.50
-------

Transaction ID : SB17.60629

**B. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

2204.09
---------

Transaction ID : SB17.60142

**C. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

9.69
------

Transaction ID : SB17.60142.2

[MEMO ITEM]

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

2233.59

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

5.37
------

Transaction ID : SB17.60142.3

**[MEMO ITEM]****B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

Amount of Each Disbursement this Period

8.30
------

Transaction ID : SB17.60142.6

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

Amount of Each Disbursement this Period

7.15
------

Transaction ID : SB17.60142.8

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2014

Amount of Each Disbursement this Period

7.63
------

Transaction ID : SB17.60142.12

**[MEMO ITEM]****B. NO PA**

Mailing Address 800 F Street NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2014

Amount of Each Disbursement this Period

110.20
--------

Transaction ID : SB17.60142.13

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

Amount of Each Disbursement this Period

7.28
------

Transaction ID : SB17.60142.14

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

0.00
------

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RA Rayburn**

Mailing Address Rayburn House Office Building

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60142.15

**[MEMO ITEM]****B. Sonoma**

Full Name (Last, First, Middle Initial)

Mailing Address 223 Pennsylvania Avenue, S.E.

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

Amount of Each Disbursement this Period

85.40
-------

Transaction ID : SB17.60142.16

**[MEMO ITEM]****c. UBER Technologies**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2014

Amount of Each Disbursement this Period

15.00
-------

Transaction ID : SB17.60142.20

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RA Rayburn**

Mailing Address Rayburn House Office Building

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

21.95
-------

Transaction ID : SB17.60142.22

**[MEMO ITEM]****B. Fiola Restaurant**

Mailing Address 601 Pennsylvania Avenue

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

117.90
--------

Transaction ID : SB17.60142.24

**[MEMO ITEM]****c. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

1178.00
---------

Transaction ID : SB17.60142.25

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JetBlue Airways**

Mailing Address 27-01 Queens Plaza

City	State	Zip Code
Long Island City	NY	11101

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		02		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60142.27

**[MEMO ITEM]****B. Peppercorn's Grill**

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

137.48
--------

Transaction ID : SB17.60142.30

**[MEMO ITEM]****C. Marco Polo Restaurant**

Mailing Address 1250 Burnside Avenue

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

25.21
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Transaction ID : SB17.60142.31

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

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

12.51
-------

Transaction ID : SB17.60142.32

**[MEMO ITEM]****B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE**Mailing Address Palladian 1  
220 Leigh Farm Rd

City	State	Zip Code
Durham	NC	27707

Purpose of Disbursement  
In-kind - Food and beverage and facility fee

Candidate Name

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

Disbursement For: 2014	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

Amount of Each Disbursement this Period

452.36
--------

Transaction ID : SB17.59314

**c. Ascot Catering**

Mailing Address 136 Main Street

City	State	Zip Code
Wethersfield	CT	06109

Purpose of Disbursement  
Catering

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

804.27
--------

Transaction ID : SB17.60179

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

1256.63

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Augie & Ray's**

Mailing Address 314 Main Street

City	State	Zip Code
East Hartford	CT	06118

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

Amount of Each Disbursement this Period

47.78
-------

Transaction ID : SB17.60357

**B. Augie & Ray's**

Mailing Address 314 Main Street

City	State	Zip Code
East Hartford	CT	06118

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

189.85
--------

Transaction ID : SB17.60151

**c. Berkshire Bank CBT**

Mailing Address 7 Sycamore Street

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

10.00
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Transaction ID : SB17.60639

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

247.63

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Berkshire Bank CBT**

Mailing Address 7 Sycamore Street

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.60631

**B. Berkshire Bank CBT**

Mailing Address 7 Sycamore Street

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

10.00
-------

Transaction ID : SB17.60625

**c. Chuck Brain**

Mailing Address 316 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
In-Kind - Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.60527

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

520.00

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

PAGE 149 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Bridgewater Chocolates**

Mailing Address 12 LaSalle Road

City	State	Zip Code
West Hartford	CT	06107

Purpose of Disbursement  
Gifts

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

92.52
-------

Transaction ID : SB17.60149

**B. Budget Printers & Office Supplies**

Mailing Address 1718 Park Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

914.61
--------

Transaction ID : SB17.60013

**C. Budget Printers & Office Supplies**

Mailing Address 1718 Park Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

Amount of Each Disbursement this Period

588.65
--------

Transaction ID : SB17.60667

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

1595.78

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Capitol Report Media Group**

Mailing Address 310 Town Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

City	State	Zip Code
East Haddam	CT	06423

Amount of Each Disbursement this Period

7500.00
---------

Purpose of Disbursement  
Advertisements

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID : SB17.60091**

Full Name (Last, First, Middle Initial)

**B. Capitol Tax Partners**

Mailing Address 101 Constitution Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

City	State	Zip Code
Washington	DC	20001

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
Food and beverage

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID : SB17.60057**

Full Name (Last, First, Middle Initial)

**C. Linda Christiana**

Mailing Address 96 Oak Forest Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

City	State	Zip Code
Manchester	CT	06040

Amount of Each Disbursement this Period

788.46
--------

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID : SB17.60308****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8538.46

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Linda Christiana**

Mailing Address 96 Oak Forest Drive

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

788.46
--------

Transaction ID : SB17.60528

**B. Linda Christiana**

Mailing Address 96 Oak Forest Drive

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

771.63
--------

Transaction ID : SB17.60573

**c. Clarke and Sampson, Inc.**

Mailing Address 228 S Washington Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

4669.00
---------

Transaction ID : SB17.60700

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

6229.09

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Clarke and Sampson, Inc.**

Mailing Address 228 S Washington Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

Amount of Each Disbursement this Period

937.59
--------

Transaction ID : SB17.60105

**B. Comcast Corporation**

Mailing Address PO Box 1577

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Telephone and internet services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

Amount of Each Disbursement this Period

376.31
--------

Transaction ID : SB17.60364

**c. Comcast Corporation**

Mailing Address PO Box 1577

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Phone and internet services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		24		2014

Amount of Each Disbursement this Period

376.16
--------

Transaction ID : SB17.60570

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

937.59

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Comcast Corporation**

Mailing Address PO Box 1577

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement  
Phone and internet services

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

Amount of Each Disbursement this Period

376.16
--------

Transaction ID : SB17.60188

**B. Commissioner of Revenue Services**

Mailing Address P.O. Box 5055

City	State	Zip Code
Hartford	CT	06102

Purpose of Disbursement  
Taxes

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

Amount of Each Disbursement this Period

84.75
-------

Transaction ID : SB17.60332

**C. Commissioner of Revenue Services**

Mailing Address P.O. Box 5055

City	State	Zip Code
Hartford	CT	06102

Purpose of Disbursement  
Taxes

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

356.36
--------

Transaction ID : SB17.60552

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

817.27

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Commissioner of Revenue Services**

Mailing Address P.O. Box 5055

City	State	Zip Code
Hartford	CT	06102

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

Amount of Each Disbursement this Period

358.44
--------

Transaction ID : SB17.60131

**B. Conn. Women's Hall of Fame**

Mailing Address 320 Fitch Street

City	State	Zip Code
New Haven	CT	06151

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.60075

**C. Core Documents**

Mailing Address 501 Village Green Parkway

City	State	Zip Code
Bradenton	FL	34209

Purpose of Disbursement  
Payroll service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

27.00
-------

Transaction ID : SB17.60315

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

585.44

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Core Documents**

Mailing Address 501 Village Green Parkway

City	State	Zip Code
Bradenton	FL	34209

Purpose of Disbursement  
Payroll service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

27.00
-------

Transaction ID : SB17.60532

**B. Core Documents**

Mailing Address 501 Village Green Parkway

City	State	Zip Code
Bradenton	FL	34209

Purpose of Disbursement  
Payroll service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

27.00
-------

Transaction ID : SB17.60117

**c. Crocodile Club**

Mailing Address 95 Riverside Avenue

City	State	Zip Code
Bristol	CT	06010

Purpose of Disbursement  
Event tickets

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.60108

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

454.00

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Cross Sound Ferry**

Mailing Address 2 Ferry Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		08		2014

City	State	Zip Code
New London	CT	06320

Amount of Each Disbursement this Period

1544.85
---------

Purpose of Disbursement  
Ferry rental, food and beverageCategory/  
Type**Transaction ID : SB17.60034**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. CT Unemployment Tax**

Mailing Address 200 Folly Brook Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

City	State	Zip Code
Wethersfield	CT	06109

Amount of Each Disbursement this Period

196.17
--------

Purpose of Disbursement  
TaxesCategory/  
Type**Transaction ID : SB17.60333**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. CT Unemployment Tax**

Mailing Address 200 Folly Brook Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

City	State	Zip Code
Wethersfield	CT	06109

Amount of Each Disbursement this Period

34.17
-------

Purpose of Disbursement  
TaxesCategory/  
Type**Transaction ID : SB17.60562**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

1775.19

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Democratic State Central Committee - Fed. Account**

Mailing Address 380 Franklin Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

City	State	Zip Code
Hartford	CT	06116

Amount of Each Disbursement this Period

9350.00
---------

Purpose of Disbursement  
Event tickets and ad bookCategory/  
Type**Transaction ID : SB17.60018**

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DNA Campaigns, LLC**

Mailing Address 71 Orange Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

City	State	Zip Code
New Haven	CT	06510

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Field servicesCategory/  
Type**Transaction ID : SB17.60097**

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**c. Donnelly/Colt**

Mailing Address PO Box 188

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

City	State	Zip Code
Hampton	CT	06247

Amount of Each Disbursement this Period

1216.03
---------

Purpose of Disbursement  
T-ShirtsCategory/  
Type**Transaction ID : SB17.60050**

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

13066.03

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Donnelly/Colt**

Mailing Address PO Box 188

City	State	Zip Code
Hampton	CT	06247

Purpose of Disbursement  
T-Shirts

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 10 / 2014

Amount of Each Disbursement this Period

945.35
--------

Transaction ID : SB17.60136

**B. EarthLink, Inc.**

Mailing Address P.O. Box 7645

City	State	Zip Code
Atlanta	GA	30357

Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 14 / 2014

Amount of Each Disbursement this Period

24.95
-------

Transaction ID : SB17.60341

**c. EarthLink, Inc.**

Mailing Address P.O. Box 7645

City	State	Zip Code
Atlanta	GA	30357

Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 14 / 2014

Amount of Each Disbursement this Period

24.95
-------

Transaction ID : SB17.60557

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

995.25

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

PAGE 159 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EarthLink, Inc.**

Mailing Address P.O. Box 7645

City	State	Zip Code
Atlanta	GA	30357

Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

431.13
--------

Transaction ID : SB17.60152

**B. Exxon/Mobil**

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement  
Gasoline

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

216.76
--------

Transaction ID : SB17.60330

**C. Exxon/Mobil**

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement  
Gasoline

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

189.42
--------

Transaction ID : SB17.60549

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

431.13

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Exxon/Mobil**

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement  
Gasoline

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

285.01
--------

Transaction ID : SB17.60144

**B. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

25.39
-------

Transaction ID : SB17.60314

**c. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

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

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

25.39
-------

Transaction ID : SB17.60348

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

335.79

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

Amount of Each Disbursement this Period

25.39
-------

Transaction ID : SB17.60358

**B. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

29.77
-------

Transaction ID : SB17.60371

**c. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2014

Amount of Each Disbursement this Period

25.39
-------

Transaction ID : SB17.60539

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

80.55
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

25.39
-------

Transaction ID : SB17.60554

**B. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

25.50
-------

Transaction ID : SB17.60125

**C. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

Amount of Each Disbursement this Period

25.39
-------

Transaction ID : SB17.60130

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

76.28

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2014

Amount of Each Disbursement this Period

25.28
-------

Transaction ID : SB17.60147

**B. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

3.14
------

Transaction ID : SB17.60169

**C. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Overnight courier

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

25.28
-------

Transaction ID : SB17.60173

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

53.70
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement  
Salary

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)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2014

Amount of Each Disbursement this Period

2723.76
---------

Transaction ID : SB17.60310

**B. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement  
Reimbursement - food and beverage

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)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 10 / 2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.60324

**c. Ashley's**

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

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)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 10 / 2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB17.60324.0

[MEMO ITEM]

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

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

2823.76

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

PAGE 165 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ashley's**

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB17.60324.1

**[MEMO ITEM]****B. Ashley's**

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60324.2

**[MEMO ITEM]****c. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement  
Reimbursement - Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

110.00
--------

Transaction ID : SB17.60372

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

110.00



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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

2857.74
---------

Transaction ID : SB17.60530

**B. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement  
Reimbursement - food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.60540

**c. Ashley's**

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60540.0

[MEMO ITEM]

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

2917.74

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

PAGE 168 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ashley's**

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 06 / 2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB17.60540.1

**[MEMO ITEM]****B. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 29 / 2014

Amount of Each Disbursement this Period

2642.93
---------

Transaction ID : SB17.60575

**C. Goodwin College Foundation**

Mailing Address 745 Burnside Avenue

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Event tickets

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2014

Amount of Each Disbursement this Period

1140.00
---------

Transaction ID : SB17.60030

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

3782.93

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gravis Marketing**

Mailing Address 910 Belle Avenue

City	State	Zip Code
Winter Springs	FL	32708

Purpose of Disbursement

Candidate Name

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

Disbursement For:

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 05 / 2014

Amount of Each Disbursement this Period

332.58
--------

Transaction ID : SB17.60122

**B. Harriet Beacher Stowe Center**

Mailing Address 77 Forest Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Advertisement

Candidate Name

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

Disbursement For:

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.60032

**c. Ellen Hart**

Mailing Address 31 Woodland Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Salary

Candidate Name

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

Disbursement For:

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2014

Amount of Each Disbursement this Period

1726.22
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Transaction ID : SB17.60309

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

2258.80

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

PAGE 170 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ellen Hart**

Mailing Address 31 Woodland Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

Amount of Each Disbursement this Period

1789.35
---------

Transaction ID : SB17.60345

**B. Ellen Hart**

Mailing Address 31 Woodland Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

1602.90
---------

Transaction ID : SB17.60529

**C. Ellen Hart**

Mailing Address 31 Woodland Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

1991.97
---------

Transaction ID : SB17.60563

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

5384.22

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ellen Hart**

Mailing Address 31 Woodland Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2014

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Salary

Amount of Each Disbursement this Period

1661.90
---------

Transaction ID : SB17.60574

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Ellen Hart**

Mailing Address 31 Woodland Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Salary

Amount of Each Disbursement this Period

1868.59
---------

Transaction ID : SB17.60155

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Ellen Hart**

Mailing Address 31 Woodland Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Reimbursement -

Amount of Each Disbursement this Period

80.00
-------

Transaction ID : SB17.60193

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

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

3610.49

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Highland Park Market**

Mailing Address 317 Highland Street

City	State	Zip Code
Manchester	CT	06045

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2014

Amount of Each Disbursement this Period

211.90
--------

Transaction ID : SB17.60538

**B. Hoffman Auto**

Mailing Address Connecticut Blvd.

City	State	Zip Code
Eadt Hartford	CT	06108

Purpose of Disbursement  
Auto repairs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

1978.96
---------

Transaction ID : SB17.59995

**c. Hoffman Auto**

Mailing Address Connecticut Blvd.

City	State	Zip Code
Eadt Hartford	CT	06108

Purpose of Disbursement  
Auto repairs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

448.71
--------

Transaction ID : SB17.60022

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

2639.57

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. House of Flora Flower Market**

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

Amount of Each Disbursement this Period

90.93
-------

Transaction ID : SB17.60025

**B. House of Flora Flower Market**

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

90.93
-------

Transaction ID : SB17.60009

**C. House of Flora Flower Market**

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

207.94
--------

Transaction ID : SB17.60666

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

389.80

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : SB17.60318

**B. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : SB17.60329

**C. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : SB17.60361

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

923.49

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : SB17.60349

**B. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : SB17.60376

**C. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : SB17.60543

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

923.49

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Samuel C. Iacobellis**

Mailing Address 114 Steep Hollow Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

City	State	Zip Code
Manchester	CT	06040

Amount of Each Disbursement this Period

560.64
--------

Purpose of Disbursement  
Salary**Transaction ID : SB17.60558**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Inquiring News**

Mailing Address P. O. Box 4000236

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

City	State	Zip Code
Nartford	CT	06140

Amount of Each Disbursement this Period

1050.00
---------

Purpose of Disbursement  
Advertisement**Transaction ID : SB17.60074**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Ivy's Simply Homemade, LLC**

Mailing Address 316 Boston Post Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		12		2014

City	State	Zip Code
Waterford	CT	06385

Amount of Each Disbursement this Period

2041.92
---------

Purpose of Disbursement  
Catering**Transaction ID : SB17.60002**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

3652.56

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

PAGE 177 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Dylan A. Jennings**

Mailing Address 35 Shagbark Road

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

999.37
--------

Transaction ID : SB17.60140

**B. Dylan A. Jennings**

Mailing Address 35 Shagbark Road

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

999.37
--------

Transaction ID : SB17.60154

**C. L.E. Whitford Co., Inc.**

Mailing Address 58 Connecticut Blvd.

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

251.04
--------

Transaction ID : SB17.60065

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

2249.78

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LAZ Parking**

Mailing Address 210 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2014

Amount of Each Disbursement this Period

7.00
------

Transaction ID : SB17.60559

**B. LAZ Parking**

Mailing Address 210 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2014

Amount of Each Disbursement this Period

17.00
-------

Transaction ID : SB17.60560

**c. LAZ Parking**

Mailing Address 210 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 02 / 2014

Amount of Each Disbursement this Period

5.00
------

Transaction ID : SB17.60112

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

29.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LAZ Parking**

Mailing Address 210 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Parking

Candidate Name

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

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2014

Amount of Each Disbursement this Period

519.00
--------

Transaction ID : SB17.60148

**B. Ledger Publications**

Mailing Address 740 North Main Street

City	State	Zip Code
West Hartford	CT	06117

Purpose of Disbursement  
Advertisement

Candidate Name

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

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 17 / 2014

Amount of Each Disbursement this Period

185.00
--------

Transaction ID : SB17.59999

**C. Ledger Publications**

Mailing Address 740 North Main Street

City	State	Zip Code
West Hartford	CT	06117

Purpose of Disbursement  
Advertisement

Candidate Name

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

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 26 / 2014

Amount of Each Disbursement this Period

325.00
--------

Transaction ID : SB17.60672

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

519.00

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

PAGE 180 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Geoffrey R. Luxenberg**

Mailing Address 45 Chatham Road

City	State	Zip Code
Manchester	CT	06042

Purpose of Disbursement  
Reimbursement - beverages

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2014

Amount of Each Disbursement this Period

27.64
-------

Transaction ID : SB17.59988

**B. Geoffrey R. Luxenberg**

Mailing Address 45 Chatham Road

City	State	Zip Code
Manchester	CT	06042

Purpose of Disbursement  
Reimbursement - Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

211.58
--------

Transaction ID : SB17.60010

**c. Maneeley's Banquet Facility, LLC**

Mailing Address 65 Rye Street

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

2497.31
---------

Transaction ID : SB17.60012

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

2736.53

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Maneeley's Banquet Facility, LLC**

Mailing Address 65 Rye Street

Date of Disbursement

M M	D D	Y Y Y Y
08	22	2014

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Catering

Amount of Each Disbursement this Period

3948.64
---------

Transaction ID : SB17.60089

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Marco Polo Restaurant**

Mailing Address 1250 Burnside Avenue

Date of Disbursement

M M	D D	Y Y Y Y
09	10	2014

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Political meals

Amount of Each Disbursement this Period

60.60
-------

Transaction ID : SB17.60135

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Marco Polo Restaurant**

Mailing Address 1250 Burnside Avenue

Date of Disbursement

M M	D D	Y Y Y Y
09	24	2014

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Political meals

Amount of Each Disbursement this Period

83.00
-------

Transaction ID : SB17.60178

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

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

4092.24

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

502.72
--------

Transaction ID : SB17.59992

**B. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

793.74
--------

Transaction ID : SB17.60016

**c. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

315.85
--------

Transaction ID : SB17.60007

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

1612.31

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

834.17
--------

Transaction ID : SB17.60073

**B. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

376.47
--------

Transaction ID : SB17.60067

**c. Marketing Solutions, LLC**

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

Amount of Each Disbursement this Period

157.39
--------

Transaction ID : SB17.60060

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

1368.03

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Mark Twain House**

Mailing Address 351 Farmington Avenue

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.60079

**B. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

288.08
--------

Transaction ID : SB17.60561

**C. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

16.30
-------

Transaction ID : SB17.60113

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

554.38



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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

3970.58
---------

Transaction ID : SB17.60096

**B. Merchant Services**

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

197.98
--------

Transaction ID : SB17.60640

**c. Merchant Services**

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

48.56
-------

Transaction ID : SB17.60636

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

4217.12



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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2014

Amount of Each Disbursement this Period

48.30
-------

Transaction ID : SB17.60634

**B. Merchant Services**

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

30.78
-------

Transaction ID : SB17.60626

**C. Merchant Services**

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

32.80
-------

Transaction ID : SB17.60627

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

111.88

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement  
Service charge

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

430.01
--------

Transaction ID : SB17.60628

**B. Mitchell Development, LLC**

Mailing Address P.O. Box 1235

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		17		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.60020

**c. Mitchell Development, LLC**

Mailing Address P.O. Box 1235

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.60011

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

430.01

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Mitchell Development, LLC**

Mailing Address P.O. Box 1235

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.60070

**B. Mitchell Development, LLC**

Mailing Address P.O. Box 1235

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.60168

**c. Christopher Moquin**

Mailing Address 7 Laurwood Drive

City	State	Zip Code
Bolton	CT	06043

Purpose of Disbursement  
Cleaning services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.60021

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

250.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Christopher Moquin**

Mailing Address 7 Laurwood Drive

City	State	Zip Code
Bolton	CT	06043

Purpose of Disbursement  
Cleaning services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.60015

**B. Christopher Moquin**

Mailing Address 7 Laurwood Drive

City	State	Zip Code
Bolton	CT	06043

Purpose of Disbursement  
Cleaning services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.60019

**c. My Campaign Store**

Mailing Address P.O. Box 596

City	State	Zip Code
Jeffersonville	IN	47131

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

446.74
--------

Transaction ID : SB17.60568

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

546.74

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

174.38
--------

Transaction ID : SB17.60090

**B. New AAA Diner**

Mailing Address 1209 Main Street

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

29.70
-------

Transaction ID : SB17.60126

**c. New AAA Diner**

Mailing Address 1209 Main Street

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

Amount of Each Disbursement this Period

30.52
-------

Transaction ID : SB17.60163

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

234.60

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.60312

**B. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

Amount of Each Disbursement this Period

225.00
--------

Transaction ID : SB17.59998

**c. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.60533

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

1525.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.60534

**B. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.60017

**c. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.60121

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

1375.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NGP Software, Inc.**

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Web services

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)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 11 / 2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.60064

**B. North End Agent**

Mailing Address 680 Blue Hills Avenue

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Advertisement

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)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 18 / 2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.60068

**C. Nuccie's Restaurant**

Mailing Address 164 Central Street

City	State	Zip Code
Forestville	CT	06010

Purpose of Disbursement  
Catering

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)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 27 / 2014

Amount of Each Disbursement this Period

531.75
--------

Transaction ID : SB17.60571

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

1606.75

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ocean State Job Lot**

Mailing Address 205 Spencer Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Supplies

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)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 21 / 2014

Amount of Each Disbursement this Period

219.56
--------

Transaction ID : SB17.60355

**B. Peppercorn's Grill**

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement  
Catering

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)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 11 / 2014

Amount of Each Disbursement this Period

4904.59
---------

Transaction ID : SB17.60107

**C. Perkins Coie**

Mailing Address 1201 Third Avenue

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement  
Compliance Advice

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)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 12 / 2014

Amount of Each Disbursement this Period

876.50
--------

Transaction ID : SB17.60014

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

6000.65

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 1201 Third Avenue

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement  
Compliance Advice

Candidate Name

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

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 25 / 2014

Amount of Each Disbursement this Period

3143.50
---------

Transaction ID : SB17.60008

**B. Peter A. Reilly Jr. Scholarship Fund**

Mailing Address 20-28 Sargeant Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement  
Advertisement

Candidate Name

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

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 10 / 2014

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.60047

**c. Poland Spring Direct**

Mailing Address P. O. Box 856192

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement  
Water

Candidate Name

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

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 03 / 2014

Amount of Each Disbursement this Period

40.97
-------

Transaction ID : SB17.60313

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

3484.47

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

PAGE 198 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Poland Spring Direct**

Mailing Address P. O. Box 856192

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement  
Water

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

Amount of Each Disbursement this Period

4.59
------

Transaction ID : SB17.60343

**B. Poland Spring Direct**

Mailing Address P. O. Box 856192

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement  
Water

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

4.28
------

Transaction ID : SB17.60556

**c. Poland Spring Direct**

Mailing Address P. O. Box 856192

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement  
Water

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

98.13
-------

Transaction ID : SB17.60150

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

107.00

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Pro Build**

Mailing Address 367 Ellington Road

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		17		2014

Amount of Each Disbursement this Period

903.43
--------

Transaction ID : SB17.60005

**B. Quick Candles**

Mailing Address 106 Prosperity Blvd.

City	State	Zip Code
Piedmont	SC	29673

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

214.94
--------

Transaction ID : SB17.60119

**c. Sam's Club**

Mailing Address 69 Pavillion Drive

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

265.77
--------

Transaction ID : SB17.60551

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

1384.14

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. School Street Plaza, LLC**

Mailing Address 360 Bloomfield Avenue

City	State	Zip Code
Windsor	CT	06095

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

Amount of Each Disbursement this Period

3712.50
---------

Transaction ID : SB17.60652

**B. Edmund J. Skowronek III**

Mailing Address 39 Robin Road

City	State	Zip Code
West Hartford	CT	06119

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

2610.79
---------

Transaction ID : SB17.60160

**c. Staples**

Mailing Address 521 Connecticut Boulevard

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

157.73
--------

Transaction ID : SB17.60347

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

6481.02

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 201 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. Staples**

Mailing Address 521 Connecticut Boulevard

City State Zip Code  
East Hartford CT 06108

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2014

Amount of Each Disbursement this Period

13.80

Transaction ID : SB17.60350

Category/  
Type

## **B. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 521 Connecticut Boulevard

City State Zip Code  
East Hartford CT 06108

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2014

Amount of Each Disbursement this Period

36.13

Transaction ID : SB17.60352

Category/  
Type

## **C. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 521 Connecticut Boulevard

City State Zip Code  
East Hartford CT 06108

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2014

Amount of Each Disbursement this Period

63.79

Transaction ID : SB17.60359

Category/  
Type

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

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

113.79

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

408.81
--------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60360

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

26.94
-------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60366

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

20.80
-------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60367

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

456.55

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

PAGE 203 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

243.71
--------

Purpose of Disbursement  
SuppliesCategory/  
Type**Transaction ID : SB17.60370**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

101.02
--------

Purpose of Disbursement  
SuppliesCategory/  
Type**Transaction ID : SB17.60537**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

182.79
--------

Purpose of Disbursement  
SuppliesCategory/  
Type**Transaction ID : SB17.60553**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

527.52

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

PAGE 204 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

71.15
-------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60127

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

31.59
-------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60128

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

27.30
-------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60177

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

130.04

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		25		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

69.66
-------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60181

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 521 Connecticut Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

166.33
--------

Purpose of Disbursement  
SuppliesCategory/  
Type

Transaction ID : SB17.60186

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**c. The Hartford**

Mailing Address Hartford Plaza

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

City	State	Zip Code
Hartford	CT	06103

Amount of Each Disbursement this Period

46.56
-------

Purpose of Disbursement  
InsuranceCategory/  
Type

Transaction ID : SB17.60342

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

282.55

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Hartford**

Mailing Address Hartford Plaza

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

Amount of Each Disbursement this Period

191.43
--------

Transaction ID : SB17.60363

**B. The Hartford**

Mailing Address Hartford Plaza

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

46.56
-------

Transaction ID : SB17.60555

**c. The Hartford**

Mailing Address Hartford Plaza

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

626.56
--------

Transaction ID : SB17.60153

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

864.56

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Hartford News**

Mailing Address 563 Franklin Avenue

City	State	Zip Code
Hartford	CT	06114

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.60059

**B. The Nutshell Cafe**

Mailing Address 229 White Street

City	State	Zip Code
Hartford	CT	06114

Purpose of Disbursement  
Political meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

Amount of Each Disbursement this Period

231.29
--------

Transaction ID : SB17.60187

**c. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Fund raising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

7990.12
---------

Transaction ID : SB17.60356

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

8621.41

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

PAGE 208 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Fund raising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

7480.25
---------

Transaction ID : SB17.60564

**B. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

555.42
--------

Transaction ID : SB17.60063

**c. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

236.11
--------

Transaction ID : SB17.60137

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

8271.78

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

PAGE 209 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

281.47
--------

Transaction ID : SB17.60138

**B. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Fund raising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

5966.23
---------

Transaction ID : SB17.60139

**c. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Printing and postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

Amount of Each Disbursement this Period

372.22
--------

Transaction ID : SB17.60164

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

6619.92

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

PAGE 210 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Fund raising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

Amount of Each Disbursement this Period

4377.36
---------

Transaction ID : SB17.60166

**B. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

384.20
--------

Transaction ID : SB17.60322

**c. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

Amount of Each Disbursement this Period

17.00
-------

Transaction ID : SB17.60331

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

4778.56

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

Amount of Each Disbursement this Period

16.95
-------

Transaction ID : SB17.60336

**B. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

Amount of Each Disbursement this Period

5.60
------

Transaction ID : SB17.60365

**C. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2014

Amount of Each Disbursement this Period

2.32
------

Transaction ID : SB17.60535

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

24.87

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

Amount of Each Disbursement this Period

340.00
--------

Transaction ID : SB17.60569

**B. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

19.99
-------

Transaction ID : SB17.60134

**C. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

245.00
--------

Transaction ID : SB17.60158

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

604.99

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

325.00
--------

Transaction ID : SB17.60159

**B. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

Amount of Each Disbursement this Period

4.12
------

Transaction ID : SB17.60185

**C. United States Treasury**

Mailing Address P.O. Box 371493

City	State	Zip Code
Pittsburgh	PA	15250

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

Amount of Each Disbursement this Period

547.66
--------

Transaction ID : SB17.60334

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

876.78

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address P.O. Box 371493

City	State	Zip Code
Pittsburgh	PA	15250

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

2484.76
---------

Transaction ID : SB17.60547

**B. United States Treasury**

Mailing Address P.O. Box 371493

City	State	Zip Code
Pittsburgh	PA	15250

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

Amount of Each Disbursement this Period

2362.82
---------

Transaction ID : SB17.60132

**C. Verizon Wireless**

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60323

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

4867.58

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

Amount of Each Disbursement this Period

357.11
--------

Transaction ID : SB17.60368

**B. Verizon Wireless**

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60546

**C. Verizon Wireless**

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.60129

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

397.11

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

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

873.56
--------

Transaction ID : SB17.60192

**B.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

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

--

**C.**

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

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

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

873.56
--------

177150.98
-----------

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

PAGE 217 OF 242

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

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 VERMONT AVENUE N W

Date of Disbursement

M M	D D	Y Y Y Y
07	18	2014

City	State	Zip Code
WASHINGTON	DC	20005

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
Refund of ContributionCategory/  
Type

Transaction ID : SB20C.60028

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. CME GROUP, INC. PAC (CME/CBOT PAC)**

Mailing Address 20 South Wacker Drive

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2014

City	State	Zip Code
Chicago	IL	60606

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Refund of ContributionCategory/  
Type

Transaction ID : SB20C.60029

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

2000.00

2000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ALSA CT Chapter**

Mailing Address 4 Oxford Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

City	State	Zip Code
Milford	CT	06460

Amount of Each Disbursement this Period

5000.00	1000.00
---------	---------

Transaction ID : SB21.60102

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. BRENDA LAWRENCE FOR CONGRESS**

Mailing Address PO BOX 3060

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

City	State	Zip Code
SOUTHFIELD	MI	48037

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.60695

Purpose of Disbursement  
Contribution - Debt retirement

Candidate Name

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MI

District: 14

Full Name (Last, First, Middle Initial)

**c. Card Services**

Mailing Address PO Box 13337

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

City	State	Zip Code
Philadelphia	PA	19101

Amount of Each Disbursement this Period

2096.00
---------

Transaction ID : SB21.60320

Purpose of Disbursement  
Credit card payment (See below)

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5096.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 219 OF 242

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

Date of Disbursement

M M / D D / Y Y Y Y
05 / 20 / 2014

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Travel - officially connected

Transaction ID : SB21.60320.0

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Sanditz Travel**

Mailing Address 98 Washington Street

Date of Disbursement

M M / D D / Y Y Y Y
05 / 22 / 2014

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

40.00
-------

Purpose of Disbursement  
Travel - officially connected

Transaction ID : SB21.60320.1

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**c. U. S. Airways**

Mailing Address Bradley International Airport

Date of Disbursement

M M / D D / Y Y Y Y
05 / 22 / 2014

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

286.00
--------

Purpose of Disbursement  
Travel - officially connected

Transaction ID : SB21.60320.2

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 220 OF 242

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Travel - Officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

Amount of Each Disbursement this Period

281.00
--------

Transaction ID : SB21.60320.3

**[MEMO ITEM]****B. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB21.60320.4

**[MEMO ITEM]****c. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

220.00
--------

Transaction ID : SB21.60320.5

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB21.60320.9

**[MEMO ITEM]****B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

Amount of Each Disbursement this Period

464.00
--------

Transaction ID : SB21.60320.10

**[MEMO ITEM]****c. Card Services**

Mailing Address PO Box 13337

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement  
Credit card payment - see below

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

1539.00
---------

Transaction ID : SB21.59300

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1539.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Officially connected - travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

229.00
--------

Transaction ID : SB21.59300.0

**[MEMO ITEM]****B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Officially connected - travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

194.00
--------

Transaction ID : SB21.59300.1

**[MEMO ITEM]****c. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Officially connected - travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB21.59300.2

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06096

Purpose of Disbursement  
Officially connected - travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

220.00
--------

Transaction ID : SB21.59300.6

**[MEMO ITEM]****B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Officially connected - travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

164.00
--------

Transaction ID : SB21.59300.7

**[MEMO ITEM]****c. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement  
Officially connected - travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB21.59300.8

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. Airways**

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

199.00
--------

Purpose of Disbursement  
Officially connected - travelCategory/  
Type

Transaction ID : SB21.59300.9

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Card Services**

Mailing Address PO Box 13337

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
Philadelphia	PA	19101

Amount of Each Disbursement this Period

90.00
-------

Purpose of Disbursement  
Officially connected - annual feeCategory/  
Type

Transaction ID : SB21.59300.10

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Card Services**

Mailing Address PO Box 13337

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

City	State	Zip Code
Philadelphia	PA	19101

Amount of Each Disbursement this Period

1214.87
---------

Purpose of Disbursement  
Credit card payment (see below)Category/  
Type

Transaction ID : SB21.60133

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1214.87



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JetBlue Airways**

Mailing Address 27-01 Queens Plaza

City	State	Zip Code
Long Island City	NY	11101

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

199.37
--------

Transaction ID : SB21.60133.4

**[MEMO ITEM]****B. JetBlue Airways**

Mailing Address 27-01 Queens Plaza

City	State	Zip Code
Long Island City	NY	11101

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		02		2014

Amount of Each Disbursement this Period

205.10
--------

Transaction ID : SB21.60133.5

**[MEMO ITEM]****c. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement  
Travel - officially connected

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2014

Amount of Each Disbursement this Period

170.10
--------

Transaction ID : SB21.60133.6

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAROL SHEA-PORTER FOR CONGRESS**

Mailing Address P.O. Box 453

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
Rochester	NH	03866

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
ContributionCategory/  
Type

Transaction ID : SB21.60041

Candidate Name

**CAROL SHEA-PORTER FOR CONGRESS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NH District: 01

Full Name (Last, First, Middle Initial)

**B. CITIZENS FOR BOYLE**

Mailing Address PO BOX 11545

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
PHILADELPHIA	PA	19116

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
ContributionCategory/  
Type

Transaction ID : SB21.60046

Candidate Name

**BRENDAN F BOYLE**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: PA District: 13

Full Name (Last, First, Middle Initial)

**C. CITIZENS FOR BOYLE**

Mailing Address PO BOX 11545

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2014

City	State	Zip Code
PHILADELPHIA	PA	19116

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
ContributionCategory/  
Type

Transaction ID : SB21.60077

Candidate Name

**BRENDAN F BOYLE**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: PA District: 13

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DEFAZIO FOR CONGRESS**

Mailing Address PO Box 1316

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

City	State	Zip Code
Springfield	OR	97477

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : SB21.60078

Purpose of Disbursement  
Contribution

Candidate Name

**PETER A DEFAZIO**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: OR District: 04

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-  
CONTRIBUTIONS**

Mailing Address 430 S CAPITOL ST SE 2ND FLOOR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2014

City	State	Zip Code
WASHINGTON	DC	20003

Amount of Each Disbursement this Period

50000.00
----------

Transaction ID : SB21.60088

Purpose of Disbursement  
Transfer of funds

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-CONTRIBUTIONS**

Mailing Address 430 S CAPITOL ST SE 2ND FLOOR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

City	State	Zip Code
WASHINGTON	DC	20003

Amount of Each Disbursement this Period

4250.00
---------

Transaction ID : SB21.60520

Purpose of Disbursement  
In-kind Contribution - Fundraising

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

52000.00
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# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-CONTRIBUTIONS**

Mailing Address 430 S CAPITOL ST SE 2ND FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
In-kind Contribution - Fundraising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2014

Amount of Each Disbursement this Period

80.19

Transaction ID : SB21.60525

[MEMO ITEM]

## **B. East Hartford Hornet Youth Football**

Mailing Address PO Box 380406

City  
East Hartford

State  
CT

Zip Code  
06138

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.59990

## **C. East Hartford Interfaith Ministries**

Mailing Address Main Street

City  
East Hartford

State  
CT

Zip Code  
06108

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB21.60076

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. East Hartford Rotary Club**

Mailing Address P.O. Box 280722

City	State	Zip Code
East Hartford	CT	06128

Purpose of Disbursement  
Advertisement

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)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 10 / 2014

Amount of Each Disbursement this Period

750.00
--------

Transaction ID : SB21.60099

**B. Friends of Fisher House**

Mailing Address PO Box 575

City	State	Zip Code
Bristol	CT	06010

Purpose of Disbursement  
Contribution

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)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 11 / 2014

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB21.60673

**c. George McKenna for School Board 2014**

Mailing Address 3818 1/2 s.S. Crenshaw Blvd.

City	State	Zip Code
Los Angeles	CA	90018

Purpose of Disbursement  
Contribution

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)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 17 / 2014

Amount of Each Disbursement this Period

1100.00
---------

Transaction ID : SB21.60000

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2150.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JOE KENNEDY FOR CONGRESS**

Mailing Address PO BOX 590464

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

City	State	Zip Code
NEWTON	MA	02459

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.60696

Purpose of Disbursement  
Contribution

Candidate Name

**JOSEPH P III KENNEDY**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MA District: 04

Full Name (Last, First, Middle Initial)

**B. KATHERINE CLARK FOR CONGRESS**

Mailing Address PO BOX 361

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
MALDEN	MA	02148

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.60054

Purpose of Disbursement  
Contribution

Candidate Name

**KATHERINE CLARK**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 05

Full Name (Last, First, Middle Initial)

**C. KEEP NICK RAHALL IN CONGRESS COMMITTEE**

Mailing Address P O Box 64

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
Beckley	WV	25802

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.60048

Purpose of Disbursement  
Contribution

Candidate Name

**NICK JOE II RAHALL**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: WV District: 03

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KUSTER FOR CONGRESS**

Mailing Address P.O. Box 1498

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
Concord	NH	03302

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : SB21.60039

Purpose of Disbursement  
Contribution

Candidate Name

**ANN MCLANE KUSTER**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NH

District: 02

Full Name (Last, First, Middle Initial)

**B. MOULTON FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2013

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

City	State	Zip Code
SALEM	MA	01970

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.60699

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MA

District: 06

Full Name (Last, First, Middle Initial)

**C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE**Mailing Address 40138 SAWMILL ROAD  
PO BOX 252

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
EMILY	MN	56447

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.60577

Purpose of Disbursement  
Contribution

Candidate Name

**RICHARD MICHAEL NOLAN**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MN

District: 08

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 235 OF 242

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RECCHIA FOR CONGRESS**

Mailing Address 172 GRAVESEND NECK ROAD

City	State	Zip Code
BROOKLYN	NY	11223

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 11

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

Amount of Each Disbursement this Period

5000.00	1000.00
---------	---------

Transaction ID : SB21.60698

**B. School Street Plaza, LLC**

Mailing Address 360 Bloomfield Avenue

City	State	Zip Code
Windsor	CT	06095

Purpose of Disbursement  
Rent

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)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

356.25
--------

Transaction ID : SB21.60004

**c. School Street Plaza, LLC**

Mailing Address 360 Bloomfield Avenue

City	State	Zip Code
Windsor	CT	06095

Purpose of Disbursement  
Rent

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)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

3712.50
---------

Transaction ID : SB21.60031

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5068.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 236 OF 242

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. School Street Plaza, LLC**

Mailing Address 360 Bloomfield Avenue

City	State	Zip Code
Windsor	CT	06095

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

3712.50
---------

Transaction ID : SB21.60080

**B. St. Patricks/St. Anthony Church**

Mailing Address 285 Church Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2014

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB21.60111

**c. The Vinci Group**

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement  
Fund raising for DCCC

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

Amount of Each Disbursement this Period

4254.00
---------

Transaction ID : SB21.60519

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10466.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Vinci Group**

Mailing Address 24 Huntington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

City	State	Zip Code
Manchester	CT	06040

Amount of Each Disbursement this Period

80.19
-------

Purpose of Disbursement  
Fund raising for DCCCCategory/  
Type

Transaction ID : SB21.60524

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. TIERNEY FOR CONGRESS COMMITTEE**

Mailing Address 7 LOMAS DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
FRAMINGHAM	MA	01701

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
ContributionCategory/  
Type

Transaction ID : SB21.60049

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA

District: 07

Full Name (Last, First, Middle Initial)

**C. TIM BISHOP FOR CONGRESS**

Mailing Address 100 Wooley Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

City	State	Zip Code
Southampton	NY	11968

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
ContributionCategory/  
Type

Transaction ID : SB21.60040

Candidate Name

**TIMOTHY BISHOP**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: NY

District: 01

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4080.19

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 238 OF 242

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TULSI FOR HAWAII**

Mailing Address PO BOX 75561

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

City	State	Zip Code
KAPOLEI	HI	96707

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
ContributionCategory/  
Type

Transaction ID : SB21.60087

Candidate Name

**TULSI GABBARD**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: HI District: 02

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

102115.31

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 239 OF 242

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Charles R. Epstein**

Nature of Debt (Purpose):

Reimbursement - Food and Beverage

Mailing Address 19 Crest Drive

City State

Zip Code

Cromwell

CT

06416

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD9.48266

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Geoffrey R. Luxenberg**

Nature of Debt (Purpose):

Supplies

Mailing Address 45 Chatham Road

City State

Zip Code

Manchester

CT

06042

Outstanding Balance Beginning This Period

156.32

Transaction ID : SD9.48276

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

156.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Robert E. Patricelli**

Nature of Debt (Purpose):

Reimbursement - Food

Mailing Address 77 Hartford Road

City

State

Zip Code

Simsbury

CT

06070

Outstanding Balance Beginning This Period

524.48

Transaction ID : SD9.56160

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

524.48

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

780.80

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 (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 240 OF 242

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Suburban Liquor Shop**Nature of Debt (Purpose):  
**Beverages**

Mailing Address 26 New Britain Avenue

City State

Zip Code

Rocky Hill

CT

06067

Outstanding Balance Beginning This Period

208.83

**Transaction ID : SD9.48270**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

208.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ►

208.83

2) **TOTALS** This Period (last page this line number only) ..... ►

989.63

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) ►

989.63

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 241 OF 242

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL  
EDUCATION**

Nature of Debt (Purpose):

Contribution returned 7/14/2012

Mailing Address 555 NEW JERSEY AVENUE N W

City State

Zip Code

WASHINGTON

DC

20001

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.49876

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Perkins Coie**

Nature of Debt (Purpose):

Compliance advice

Mailing Address 1201 Third Avenue

City State

Zip Code

Seattle

WA

98101

Outstanding Balance Beginning This Period

630.00

Transaction ID : SD10.43734

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Steptoe & Johnson, LLP**

Nature of Debt (Purpose):

Facility Fee

Mailing Address 1330 Connecticut Avenue, NW

City

State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

50.00

Transaction ID : SD10.37308

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

3180.00

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 (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 242 OF 242

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LARSON FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Verizon Wireless**

Nature of Debt (Purpose):

Cell phone service

Mailing Address 20 Alexander Drive

City State

Zip Code

Wallingford

CT

06492

Outstanding Balance Beginning This Period

482.92

Transaction ID : SD10.42519

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

482.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

482.92

2) **TOTALS** This Period (last page this line number only) .....

3662.92

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) .....

3662.92