

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
Vermont Democratic Party

ADDRESS (number and street) PO Box 1220
Check if different than previously reported. (ACC) Montpelier VT 05601

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00024679 3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 03 / 01 / 2009 through 03 / 31 / 2009

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 Linda Weiss

Signature of Treasurer Linda Weiss [Electronically Filed] Date 05 / 17 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Vermont Democratic Party

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2009"/>		37900.79
(b) Cash on Hand at Beginning of Reporting Period.....	30726.47	
(c) Total Receipts (from Line 19)	34734.50	64413.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	65460.97	102314.12
7. Total Disbursements (from Line 31).....	26602.36	63455.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	38858.61	38858.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Vermont Democratic Party

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18600.00	34620.00
(ii) Unitemized	12184.50	15303.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	30784.50	49923.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2125.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	32784.50	52048.50
12. Transfers From Affiliated/Other Party Committees.....	1950.00	1950.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	5856.21
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	4558.62
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	4558.62
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	34734.50	64413.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	34734.50	59854.71

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	542.17	1091.48
(ii) Non-Federal Share.....	2039.58	4106.04
(b) Other Federal Operating Expenditures	20476.03	21083.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23057.78	26281.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	18500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	2500.00	6725.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	1044.58	11949.50
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	1044.58	11949.50
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26602.36	63455.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24562.78	59349.47

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	32784.50	52048.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32784.50	52048.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21018.20	22174.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	5856.21
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21018.20	16318.76

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Please be advised that the salaries and payroll taxes reported on Schedule H4 were for employees who spent 25% or less of their time during the reporting period in connection with federal elections or on Federal Election Activity and. In addition, please note that unless additional memo text is included, salaries and payroll taxes reported on Schedule B Line 30 B were for employees who were not working for a specific federal candidate but were involved in Federal Election Activity.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)
A. Bill A. Bartlett

Mailing Address **PO Box 123**

City **Hyde Park** State **VT** Zip Code **05655-0123**

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

Name of Employer **self-employed** Occupation **consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
03 / 17 / 2009

Transaction ID : C17983597

Amount of Each Receipt this Period
480.00

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

Mailing Address **PO Box 192**

City **Bakersfield** State **VT** Zip Code **05441-0192**

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

Name of Employer **Self-employed** Occupation **Editor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
03 / 28 / 2009

Transaction ID : C17983624

Amount of Each Receipt this Period
400.00

Full Name (Last, First, Middle Initial)
c. Cynthia Bingham

Mailing Address **784 Willow Brook Ln**

City **St George** State **VT** Zip Code **05495-7078**

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

Name of Employer **self-employed** Occupation **REM**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
03 / 26 / 2009

Transaction ID : C17984706

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional).....▶	1120.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)
A. Susan Boswell

Mailing Address 277 Van Cortland Rd

City State Zip Code
Brandon VT 05733-8889

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

Name of Employer Occupation
self homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2009
Transaction ID : C17984698

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Tim C Briglin

Mailing Address 459 Tucker Hill Rd

City State Zip Code
Thetford Center VT 05075-8788

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

Name of Employer Occupation
Tuckerman Capital Investment Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2009
Transaction ID : C17984760

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. John A. Burgess Sr.

Mailing Address PO Box 764

City State Zip Code
Morrisville VT 05661-0764

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2009
Transaction ID : C17983593

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1240.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 31
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)
A. David R Chipman

Mailing Address 200 Wake Robin Dr

City State Zip Code
Shelburne VT 05482-7569

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2009

Transaction ID : C17984734

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Edward W. Clark Jr

Mailing Address PO Box 2

City State Zip Code
Guildhall VT 05905-0002

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

Name of Employer Occupation
self-employed art dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2009

Transaction ID : C17984440

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Dorothy Deans

Mailing Address 734 Galaxy Hill Rd

City State Zip Code
North Pomfret VT 05053-4403

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

Name of Employer Occupation
Not Employed Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2009

Transaction ID : C17983578

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

A. Valerie Graham
Full Name (Last, First, Middle Initial)

Mailing Address 420 Lake Rd

City Charlotte State VT Zip Code 05445-9673

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

Name of Employer none Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 03 / 28 / 2009
Transaction ID : C17984435

Amount of Each Receipt this Period 120.00

B. Linda C Gray
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1008

City Norwich State VT Zip Code 05055-1008

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

Name of Employer Cedar Circle Farm Occupation Farm Stand Manager

Receipt For: 2010 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 22 / 2009
Transaction ID : C17984727

Amount of Each Receipt this Period 20.00

c. Thomas O. Gray
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1008

City Norwich State VT Zip Code 05055-1008

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2009 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 16 / 2009
Transaction ID : C18128478

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 640.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)
A. Thomas M. Hurst

Mailing Address 29 East St
P. O. Box 136

City Greensboro State VT Zip Code 05841-8172

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2009

Transaction ID : C17983529

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 189

City South Hero State VT Zip Code 05486-0189

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2009

Transaction ID : C17983633

Amount of Each Receipt this Period
240.00

Full Name (Last, First, Middle Initial)
c. Mary P Kehoe

Mailing Address 27 Kingsland Ter

City Burlington State VT Zip Code 05401-5501

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

Name of Employer Information Requested Occupation Information Requested
Lisman Webster & Leckerling Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2009

Transaction ID : C17983531

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....▶	2490.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial) A. Marion K. Kellogg		Date of Receipt
Mailing Address 772 Brush Hill Rd		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
City State Zip Code Stowe VT 05672-4309		Transaction ID : C17983606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Retired Retired		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. Margaret Kidder		Date of Receipt
Mailing Address 94 Piper Walling Rd		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
City State Zip Code Bradford VT 05033-8874		Transaction ID : C17983600
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Retired Retired		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Charles F. Kireker III		Date of Receipt
Mailing Address 303 Cow Hill Rd		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
City State Zip Code Weybridge VT 05753-9541		Transaction ID : C17984750
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Fresh Tracks Capital Venture Capitalist		<input type="text" value="1000.00"/>
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)
A. Crea S. Lintilhac

Mailing Address 886 N Gate Rd

City Shelburne State VT Zip Code 05482-7211

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

Name of Employer Self-employed Occupation Philanthropist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2009
Transaction ID : C17984449

Amount of Each Receipt this Period
380.00

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

Mailing Address PO Box 21

City Post Mills State VT Zip Code 05058-0021

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

Name of Employer OSEU Occupation Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2009
Transaction ID : C17983579

Amount of Each Receipt this Period
330.00

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

Mailing Address PO Box 298

City South Strafford State VT Zip Code 05070-0298

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

Name of Employer Self Occupation Economic Development Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2009
Transaction ID : C17984621

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 720.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial) A. Jill Michaels		Date of Receipt
Mailing Address PO Box 298		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
City	State	Zip Code
South Strafford	VT	05070-0298
FEC ID number of contributing federal political committee.		Transaction ID : C17984763
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Self	Economic Development Consultant	
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="380.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Paul Millman		Date of Receipt
Mailing Address PO Box 935		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
City	State	Zip Code
Westminster	VT	05158-0935
FEC ID number of contributing federal political committee.		Transaction ID : C17983540
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Chroma Technology	Co-Founder	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="580.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Paul Millman		Date of Receipt
Mailing Address PO Box 935		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
City	State	Zip Code
Westminster	VT	05158-0935
FEC ID number of contributing federal political committee.		Transaction ID : C17983641
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="480.00"/>
Name of Employer	Occupation	
Chroma Technology	Co-Founder	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="580.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="830.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial) A. Marcia Moody		Date of Receipt
Mailing Address 1 Maple St		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
City	State	Zip Code
Newmarket	NH	03857-1803
FEC ID number of contributing federal political committee.		Transaction ID : C17984717
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
State of New Hampshire	State Representative	
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Douglas A. Racine		Date of Receipt
Mailing Address 909 Wes White HI		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
City	State	Zip Code
Richmond	VT	05477-9255
FEC ID number of contributing federal political committee.		Transaction ID : C17984460
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>
Name of Employer	Occupation	
Willie Racine's, Inc.	Business Owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="370.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Patrick S. Robins		Date of Receipt
Mailing Address 1 Juniper Ter		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
City	State	Zip Code
Burlington	VT	05401-3920
FEC ID number of contributing federal political committee.		Transaction ID : C17983522
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
McAulliffe Inc	Executive	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="750.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="420.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 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)
Vermont Democratic Party

A. Prentiss C. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 563 South St
 City Brattleboro State VT Zip Code 05301-4232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prentiss Smith & Company Inc./Inve Occupation Portfolio Manager
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2009
Transaction ID : C17984677
 Amount of Each Receipt this Period
 1000.00

B. Winthrop H. Smith Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 Galloping Wind Trl
 City Warren State VT Zip Code 05674-9473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer President Occupation WHS Holdings LLC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2009
Transaction ID : C17984445
 Amount of Each Receipt this Period
 1000.00

C. Jane W. Stetson
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 Elm St
 City Norwich State VT Zip Code 05055-9445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DNC Occupation National Finance Chair
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2009
Transaction ID : C17984441
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

A. Mary M Sullivan
Full Name (Last, First, Middle Initial)
Mailing Address 84 Caroline St
City Burlington State VT Zip Code 05401-4812
FEC ID number of contributing federal political committee. **C**
Name of Employer Burlington Electric Dept. Occupation Communications Director
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2009
Transaction ID : C17984720
Amount of Each Receipt this Period
60.00

B. Mary M Sullivan
Full Name (Last, First, Middle Initial)
Mailing Address 84 Caroline St
City Burlington State VT Zip Code 05401-4812
FEC ID number of contributing federal political committee. **C**
Name of Employer Burlington Electric Dept. Occupation Communications Director
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2009
Transaction ID : C17983545
Amount of Each Receipt this Period
80.00

C. Morgan L Wolaver
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 53
City Richmond State VT Zip Code 05477-0053
FEC ID number of contributing federal political committee. **C**
Name of Employer Otter Creek Brewing Occupation retired
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2009
Transaction ID : C17984664
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1140.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 18 OF 31
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

A. Full Name (Last, First, Middle Initial)
Jeffery D. Wolfe PE

Mailing Address PO Box 161

City State Zip Code
Strafford VT 05072-0161

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

Name of Employer Occupation
groSolar / Wolfe Energy CEO / consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 12 / 2009

Transaction ID : C17984742

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	18600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

A. Green Mountain PAC
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1142

City Montpelier	State VT	Zip Code 05601-1142
FEC ID number of contributing federal political committee. C C00409110	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009
Transaction ID : C17983533
Amount of Each Receipt this Period
1000.00

B. Welch for Congress
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1086

City Montpelier	State VT	Zip Code 05601-1086
FEC ID number of contributing federal political committee. C C00413179	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009
Transaction ID : C17983524
Amount of Each Receipt this Period
1000.00

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

City	State	Zip Code
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

A. Democratic National Committee

Full Name (Last, First, Middle Initial)
Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2009
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2009

Transaction ID : C18105200

Amount of Each Receipt this Period
 1950.00

* In-Kind: On-line Voter File Access

B. Dollars for Democrats

Full Name (Last, First, Middle Initial)
Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6323.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2009

Transaction ID : C18333501

Amount of Each Receipt this Period
 6323.00

[MEMO ITEM]
 * Dollars For Democrats

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1950.00
TOTAL This Period (last page this line number only).....▶	1950.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Chittenden Bank

Mailing Address State St

City Montpelier State VT Zip Code 05602

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2009

Transaction ID : D378531

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Chittenden Bank

Mailing Address State St

City Montpelier State VT Zip Code 05602

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2009

Transaction ID : D378548

Amount of Each Disbursement this Period

7.16

Full Name (Last, First, Middle Initial)

C. Chittenden Bank

Mailing Address State St

City Montpelier State VT Zip Code 05602

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2009

Transaction ID : D378549

Amount of Each Disbursement this Period

7.16

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

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

64.32

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Chittenden Bank

Mailing Address State St

City Montpelier State VT Zip Code 05602

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2009

Transaction ID : D378550

Amount of Each Disbursement this Period

7.25

Full Name (Last, First, Middle Initial)

B. Chittenden Bank

Mailing Address State St

City Montpelier State VT Zip Code 05602

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2009

Transaction ID : D378551

Amount of Each Disbursement this Period

8.49

Full Name (Last, First, Middle Initial)

C. Democratic National Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement
On-line Voter File Access

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2009 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2009

Transaction ID : D378467

Amount of Each Disbursement this Period

1950.00

* In-Kind Received

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

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

1965.74

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Hilton Burlington

Mailing Address 60 Battery St

City Burlington State VT Zip Code 05401-5207

Purpose of Disbursement
Venue Rental and Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D372927

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Hilton Burlington

Mailing Address 60 Battery St

City Burlington State VT Zip Code 05401-5207

Purpose of Disbursement
Venue Rental and Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D372928

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Hilton Burlington

Mailing Address 60 Battery St

City Burlington State VT Zip Code 05401-5207

Purpose of Disbursement
Venue Rental and Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D372931

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Selene M. Hofer-Shall

Mailing Address 6 1/2 N Winooski Ave #4

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2009

Transaction ID : D372925

Amount of Each Disbursement this Period

522.01

Full Name (Last, First, Middle Initial)

B. Selene M. Hofer-Shall

Mailing Address 6 1/2 N Winooski Ave #4

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2009

Transaction ID : D378537

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. The Mailing Center

Mailing Address PO Box 1220
9 Auburn Street

City Barre State VT Zip Code 05641-1220

Purpose of Disbursement
Mail Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2009

Transaction ID : D372926

Amount of Each Disbursement this Period

420.90

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

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

2942.91

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. CYBERSOURCE

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2009

Transaction ID : D378530

Amount of Each Disbursement this Period

44.02

Full Name (Last, First, Middle Initial)

B. CYBERSOURCE

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2009

Transaction ID : D378621

Amount of Each Disbursement this Period

338.01

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

382.03

20476.03

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Vermont Democratic Party

Mailing Address 29 Main St
Ste 3

City Montpelier State VT Zip Code 05602-2952

Purpose of Disbursement
Transfer of misdeposited funds to non-federal account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 05 / 2009

Transaction ID : D508240

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Vermont Democratic Party

Mailing Address 29 Main St
Ste 3

City Montpelier State VT Zip Code 05602-2952

Purpose of Disbursement
Transfer of misdeposited funds to non-federal account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 05 / 2009

Transaction ID : D508241

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2500.00

2500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Ian P. Carleton

Mailing Address 898 Economou Rd

City Huntington State VT Zip Code 05462-9636

Purpose of Disbursement
State Chair Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Transaction ID : D372922

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

B. Automatic Data Processing, Inc.

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement
payroll processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Transaction ID : D378534

Amount of Each Disbursement this Period

72.00

Full Name (Last, First, Middle Initial)

C. Automatic Data Processing, Inc.

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement
payroll processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Transaction ID : D378535

Amount of Each Disbursement this Period

72.00

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

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

1044.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Vermont Democratic Party

Full Name (Last, First, Middle Initial)

A. Automatic Data Processing, Inc.

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement
payroll processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2009

Transaction ID : D378541

Amount of Each Disbursement this Period

0.58

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

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)..... ▶

0.58

1044.58

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Vermont Democratic Party

A. Full Name (Last, First, Middle Initial) Bigglestone Investment		Transaction ID : D378536		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54 Main St				Allocated Activity or Event Year-To-Date 5197.52		
City Montpelier	State VT	Zip Code 05602-2991		Date 03 / 07 / 2009		
Purpose of Disbursement: Office Rent		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
188.79			710.21			899.00

B. Full Name (Last, First, Middle Initial) Crowley Insurance Agency, Inc.		Transaction ID : D378543		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 100 N Willard St				Allocated Activity or Event Year-To-Date 5197.52		
City Burlington	State VT	Zip Code 05401-3315		Date 03 / 20 / 2009		
Purpose of Disbursement: Liability Insurance		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
16.22			61.03			77.25

C. Full Name (Last, First, Middle Initial) Traveler's - RMD		Transaction ID : D372930		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 3556				Allocated Activity or Event Year-To-Date 5197.52		
City Orlando	State FL	Zip Code 32802-3556		Date 03 / 20 / 2009		
Purpose of Disbursement: Insurance		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
311.64			1172.36			1484.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
516.65		1943.60		2460.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Vermont Democratic Party

A. Full Name (Last, First, Middle Initial) Transaction ID : D378529 GoDaddy.com		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14455 N Hayden Rd Ste 219		Allocated Activity or Event Year-To-Date 5197.52	
City State Zip Code Scottsdale AZ 85260-6993	Date MM / DD / YYYY 03 / 02 / 2009		
Purpose of Disbursement: website hosting fee	Category/ Type	Allocated Activity or Event Year-To-Date 5197.52	
Activity or Event Identifier: Administrative		Date MM / DD / YYYY 03 / 02 / 2009	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
0.84 + 3.15 = 3.99			

B. Full Name (Last, First, Middle Initial) Transaction ID : D378532 TollFreeForwarding.com		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5959 W Century Blvd Ste 1108		Allocated Activity or Event Year-To-Date 5197.52	
City State Zip Code Los Angeles CA 90045-6512	Date MM / DD / YYYY 03 / 03 / 2009		
Purpose of Disbursement: toll free forwarding number	Category/ Type	Allocated Activity or Event Year-To-Date 5197.52	
Activity or Event Identifier: Administrative		Date MM / DD / YYYY 03 / 03 / 2009	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
4.15 + 15.62 = 19.77			

C. Full Name (Last, First, Middle Initial) Transaction ID : D378540 Mail Trust		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 755 University City Blvd		Allocated Activity or Event Year-To-Date 5197.52	
City State Zip Code Blacksburg VA 24060-2705	Date MM / DD / YYYY 03 / 09 / 2009		
Purpose of Disbursement: Web Hosting	Category/ Type	Allocated Activity or Event Year-To-Date 5197.52	
Activity or Event Identifier: Administrative		Date MM / DD / YYYY 03 / 09 / 2009	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
19.69 + 74.06 = 93.75			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.68		92.83		117.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Vermont Democratic Party

A. Full Name (Last, First, Middle Initial) GoDaddy.com		Transaction ID : D378546	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14455 N Hayden Rd Ste 219			Allocated Activity or Event Year-To-Date 5197.52	
City Scottsdale	State AZ	Zip Code 85260-6993	Date MM / DD / YYYY 03 / 30 / 2009	
Purpose of Disbursement: website hosting fee		Category/ Type		
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
0.84			3.15	
		=	TOTAL AMOUNT	
			3.99	

B. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address		Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Date MM / DD / YYYY	
Purpose of Disbursement:		Category/ Type		
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	
		=	TOTAL AMOUNT	

C. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address		Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Date MM / DD / YYYY	
Purpose of Disbursement:		Category/ Type		
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	
		=	TOTAL AMOUNT	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		3.15		3.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
542.17	2039.58	2581.75